

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738938

FILED
Apr 22, 2009
Secretary of State

Entity Name: PRESBYTERIAN CHURCH IN THE HIGHLANDS, INCORPORATED, OF LAKE LAND, FLORIDA

Current Principal Place of Business:

1010 LAKE MIRIAM DR
LAKE LAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

1010 LAKE MIRIAM DR
LAKE LAND, FL 33813

New Mailing Address:

FEI Number: 59-1566718 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARMSTRONG, DAVID
400 W. BEACON RD.
#609
LAKE LAND, FL 33803 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: ADAMS, MARILYN
Address: 2025 SYLVESTER ROAD, UNIT 0-2
City-St-Zip: LAKE LAND, FL 33803

Title: T () Delete
Name: DAYVAULT, JIM
Address: 5328 GLENMORE DRIVE
City-St-Zip: LAKE LAND, FL 33813

Title: VP () Delete
Name: BRENNEMAN, DAN
Address: 730 ROYAL GLEN DRIVE
City-St-Zip: LAKE LAND, FL 33813

Title: D () Delete
Name: ARMSTRONG, DAVID
Address: 400 W. BEACON ROAD
City-St-Zip: #609, FL 33803

Title: D () Delete
Name: KAE LIN, CHRIS
Address: 5108 GRAND BLVD.
City-St-Zip: LAKE LAND, FL 33812

Title: P () Delete
Name: WOLFERSBERGER, JILL
Address: 5526 DEER TRACKS TRAIL
City-St-Zip: LAKE LAND, FL 33811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: MATHISON, ANN
Address: 3144 HIGHLANDS LAKEVIEW CIRCLE
City-St-Zip: LAKE LAND, FL 33812

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANN W MATHISON

P

04/22/2009

Electronic Signature of Signing Officer or Director

_____ Date