

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 739722 (7)
1. Corporation Name
HIGHLAND PRESBYTERIAN CHURCH OF LARGO, INC.



Principal Place of Business
**1885 S HIGHLAND AVE
CLEARWATER FL 34616-8750**

Mailing Address
**1885 S HIGHLAND AVE
CLEARWATER FL 34616-8750**

3. Date Incorporated or Qualified
07/25/1977

3a. Date of Last Report
03/02/1995

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number 59-6151639	Applied For Not Applicable
		5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

**NORTON, CAROL J.
1231 11TH COURT S.W.
LARGO FL 34640**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROBINSON, MARILYN 2293 AUSTRIAN LANE #21 CLEARWATER FL	☒ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PENNEY, FRANKLIN F. 2663 SEQUOIA TERRACE PALM HARBOR FL	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROCKWELL, SHIRLEY R. 1117 LIVE OAK CT CLEARWATER FL	☒ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SCOTT, DAVID 1682 LAKE AVENUE CLEARWATER FL	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCRIVENER, MARY J. 10230 138 ST N LARGO FL	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BAKER, RALPH DR. 700 STARKEY RD, APT. 1024 LARGO FL	☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	PD ORMANIAN, JEANETTE 1377 EMBASSY DRIVE CLEARWATER, FL 34624	☒ Change ☐ Addition
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP		☐ Change ☐ Addition
31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	D ELLEN GITCHELL 1117 Montrose Place Dunedin, FL 34698	☒ Change ☐ Addition
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP		☐ Change ☐ Addition
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP		☐ Change ☐ Addition
61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	SD ROCKWELL, SHIRLEY 1117 Live Oak Court Clearwater, FL 34616	☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *David R. Scott* /DAVID R. SCOTT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 9, 1996 584-1191
Date Daytime Phone #

CR2E037 (12/95)