

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741209

FILED
May 07, 2007
Secretary of State

Entity Name: PRESBYTERY OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

2085 WEST GRANDA BLVD
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

2085 WEST GRANDA BLVD
ORMOND BEACH, FL 32174 US

New Mailing Address:

FEI Number: 59-2723127 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GANZEL, NEAL J
2085 WEST GRANADA BLVD
ORMOND BEACH, FL 32174 US

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: PD () Delete
Name: HENDLEY, DAN
Address: 190 OLIVICK CIRCLE NE
City-St-Zip: PALM BAY, FL 32907

Title: TD () Delete
Name: CORTESE, PHILIP
Address: 998 BOEING ST. NE.
City-St-Zip: PALM BAY, FL 32907

Title: SD () Delete
Name: GANZEL, NEAL J
Address: 2085 WEST GRANDA BLVD
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GANZEL, NEAL J
Address: 2085 WEST GRANADA BLVD
City-St-Zip: ORMOND BEACH, FL 32174

Title: TD (X) Change () Addition
Name: UNGER, WOLFGANG R
Address: 1820 KUMQUAT DR
City-St-Zip: EDGEWATER, FL 32132

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

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: WOLFGANG R.W. UNGER

SD

05/07/2007

Electronic Signature of Signing Officer or Director

Date