FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

FILED May 20 1997 8:00am Secretary of State

FIRST	Presbyterian Church		:						
Principal Place of Business		Mailing Address]	INII OLDII GIESI OII	/ 1(1) 5	1846 81814 4881
1780 HARTMAN ROAD FT PIERCE FL 34947		1780 HARTMAN ROAD FT PIERCE FL 34947-4410							
			:			3. Date incorporated or Qualified 02/23/1978	3a. Date of 02/	Last Re 12/19	
2. Principal Pl	ace of Business	2a. Mailing Address 26				4. FEI Number 59-0774183			plied For t Applicable
Sulte, Apt. 9		Suite, Apt. #, etc.	:			5. Certificate of Status Desired		8.75 A Fee Re	Additional equired
City & State	•	City & State				6. Election Campaign Financing			Мау Ве
23	T. Const.	28				Trust Fund Contribution		Added to	
Zip 24	Country	Zip	Cpunt 30	ry	This corporation has liabil Florida Statutes		for intangible tax under s. 199.032, Yes No		199.032,
24	9. Name and Address of Current		30]			10. Name and Address of New Reg			
			8	1 Name			,	•	
STEPHE	NS, LAURIE		8	2 Stree	l Addre	ss (P.O. Box Number is Not Acceptab	le)		
1518 CORTEZ BLVD.									
FT. PIER	ICE FL 34982		18	3					
			8	4 City		,	FL 85	Zip C	Code
11. Pursuant t	o the provisions of Sections 617.0502	and 617.1508, Florida Statute	s, the abo	ve-name	d corpo	ration submits this statement for the p		nging it:	s registered
office or re agent. I as	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such change was a tions of, Section 617.0503, Flo	uthorized rida Statut	by the co les.	rporatio	ration submits this statement for the pon's board of directors. I hereby accept	t the appointm	ient as i	registered
SIGNATURE _									
12.	Signature, typed or printed name of registered agen OFFICERS AND		Registered A	Agent signatu	ne required	d when re-instating) ADDITIONS/CHANGES TO OFFIC	DATE FOR AND DID	rciop	C IN: 19
TITLE	D. OFFICERS AND	DELETE	1.1 TITL		1	ADDITIONS/OFFANGES TO OFFICE		Change	Addition
NAME	SEVIER, DAVID	121							
STREET ADDRESS	2507 CHESTERFIELD DR		1.3 STR		.				
CITY-ST-ZIP	FT PERCE FL			-ST-2IP					
TITLE	D	DELETE	2. TITL		 			Change	Addition
NAME	HUNTER, HAROLD	-	2.2 NAM	ΙE				-	
STREET ADDRESS	4806 LAKEWOOD PARK DR		2.3 STR	ET ADDRESS					
CITY-ST-ZIP	FT PIERCE FL		2. 4 CIT	Y-\$T-ZIP					
TITLE	D	DELETE	3.1 1111					Change	Addition
NAME	BRYAN, BEN L. JR.		3.2 NAW	ŀΕ					
STREET ADDRESS	2521 SO INDIAN RIVER DR		3.3 STRI	EET ADDRESS	;				
CHTY-ST-ZIP	FT. PIERCE FL		3.) CIT	Y-ST-ZIP					
TITLE	Ď	☐ DELETE	4.1 TITL	E				Change	☐ Addition
NAME	RICE, JAMES A		4.12 NA	ИĖ					
STREET ADDRESS	2521 NO INDIAN RIVER DRIVI		4.3 STR	eet address	3				
CITY-ST-ZIP	FT. PIERCE FL			-ST-ZIP					
TITLE	D	DELETE	5. j T ITL	E				Change	Addition
NAME	BANKSTON, BURT		5.2 NAM						
STREET ADDRESS	2007 S. 30TH ST.		5.3 STR	ee1 address	}				
CITY-ST-ZIP	FT. PIERCE FL	T		-ST-ZIP		······			11100
TITLE	0	☐ DELETE	6.1 TITL				Ш	Change	Addition
NAME	PELLERIN, ROBINA		6.2 NAN						
STREET ADDRESS	5901 BUCHANAN DR.			eet address	3				
CITY-ST-ZIP	FT. PIERCE FL		6.4 CITY	-ST-ZIP					

I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 cath; 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 attamment with an address.