

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747636

FILED
Jan 06, 2009
Secretary of State

Entity Name: PINEWOODS PRESBYTERIAN CHURCH, INC.

Current Principal Place of Business:

2198 HIGHWAY 297-A
CANTONMENT, FL 32533

New Principal Place of Business:

Current Mailing Address:

2198 HIGHWAY 297-A
CANTONMENT, FL 32533

New Mailing Address:

FEI Number: 59-2056261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERSON, THOMAS C
2992 CREEKWOOD DR
CANTONMENT, FL 32533 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: DV () Delete
Name: POYNTER, SCOTT P.
Address: 4400 CRABTREE CHURCH RD
City-St-Zip: CANTONMENT, FL

Title: DP () Delete
Name: LADNER, CLARENCE
Address: 3166 LAKE SUZANNE
City-St-Zip: CANTONMENT, FL

Title: DS () Delete
Name: ROBERSON, THOMAS C
Address: 2992 CREEKWOOD DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: DT () Delete
Name: HUBBELL, DAN
Address: 5740 LANGLEY CIR
City-St-Zip: PENSACOLA, FL 32504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: POYNTER, SCOTT P.
Address: 4400 CRABTREE CHURCH RD
City-St-Zip: CANTONMENT, FL 32533

Title: DP (X) Change () Addition
Name: LADNER, CLARENCE
Address: 3166 LAKE SUZANNE
City-St-Zip: CANTONMENT, FL 32533

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

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: THOMAS C. ROBERSON

DS

01/06/2009

Electronic Signature of Signing Officer or Director

Date