

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 24, 2007 08:00 AM
Secretary of State

DOCUMENT # 747734	
1. Entity Name THE SYNOD OF SOUTH ATLANTIC, PRESBYTERIAN CHURCH (U.S.A.), INC.	
Principal Place of Business 118 EAST MONROE STREET SUITE 3 JACKSONVILLE, FL 32202-3214 US	Mailing Address 118 EAST MONROE STREET SUITE 3 JACKSONVILLE, FL 32202-3214 US



07032007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1092201	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent REV. REGINALD V. PARSONS 118 EAST MONROE STREET SUITE 3 JACKSONVILLE, FL 32202	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee Is \$61.25
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

U00000770253
07/24/07-80007-019 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, GLORIA PO BOX 997 WINNSBORO, SC
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DAVIS, MICHAEL 1898 WOODLEIGH DR W JACKSONVILLE, FL 32211
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONNIE, LEE 1328 PEACHTREE ST NE ATLANTA, GA 30309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHOWALTER, RUSSELL MR. 200 W. FORSYTH ST. SUITE 1100 JACKSONVILLE, FL 322024308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PARSONS, REGINALD V REV. 118 EAST MONROE ST, SUITE 3 JACKSONVILLE, FL 322023214
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Rev. Reginald V. Parsons* **Reginald V. Parsons** **7/10/2007** **(904) 356-6070**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #