2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #747734

1. Entity Name

THE SYNOD OF SOUTH ATLANTIC, PRESBYTERIAN CHURCH (U.S.A.), INC.



Principal Place of Business

Mailing Address

118 EAST MONROE STREET SUITE 3

JACKSONVILLE, FL 32202-3214 US

118 EAST MONROE STREET

JACKSONVILLE, FL 32202-3214 US

FILED Jul 28, 2008 08:00 AM Secretary of State



07152008 No Chg-NP

CR2E037 (4/06)

4. FEI Number	 Applied For
59-1092201	 Not Applicable
5. Certificate of Status Desired	\$8.75 Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

REV. REGINALD V. PARSONS 118 EAST MONROE STREET SUITE 3

JACKSONVILLE, FL 32202

SIGNATURE:

DO NOT WRITE IN THIS SPACE

1		\				
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 profed registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating). ALL CONTENTS OF THE CONTENTS OF						
De	Filing Fee is \$61.25 ue by September 12, 2008	Election Campaign Financi Trust Fund Contribution.	ing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRE	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, GLORIA PO BOX 997 WINNSBORO, SC				TUQQQQQQ956399 07/28/08-80001-015 61.25	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	T DAVIS, MICHAEL 1898 WOODLEIGH DR W JACKSONVILLE, FL 32211				01/20/00-00001-013 01.23	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONNIE, LEE 1328 PEACHTREE ST NE ATLANTA, GA 30309	`	DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHOWALTER, RUSSELL MR. 200 W. FORSYTH ST. SUITE 1100 JACKSONVILLE, FL. 322024308		IN THIS SPACE			
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-2IP						
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.						