

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748800

FILED  
Apr 13, 2009  
Secretary of State

**Entity Name:** THE FIRST CONGREGATIONAL CHURCH, INTERLACHEN, FL, INC.

**Current Principal Place of Business:**

415 WASHINGTON ST  
INTERLACHEN, FL 32148 US

**New Principal Place of Business:**

415 E. WASHINGTON ST  
INTERLACHEN, FL 32148 US

**Current Mailing Address:**

PO BOX 67  
INTERLACHEN, FL 32148 US

**New Mailing Address:**

**FEI Number:** 59-2893656      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAWSON, LYNN E  
PO BOX 111  
211 PROSPECT ST  
INTERLACHEN, FL 32148 US

**Name and Address of New Registered Agent:**

DAWSON, LYNN E  
211 PROSPECT ST.  
INTERLACHEN, FL 32148 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: LYNN E. DAWSON

04/13/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: OWEN, NANCY L  
Address: PO BOX 983  
City-St-Zip: INTERLACHEN, FL 32148

Title: D ( ) Delete  
Name: DAVIS, WALTER  
Address: PO BOX 1199; 161 REAVES AVENUE  
City-St-Zip: INTERLACHEN, FL 32148

Title: D ( ) Delete  
Name: DAWSON, MARY LOU  
Address: PO BOX 111; 211 PROSPECT AVENUE  
City-St-Zip: INTERLACHEN, FL 32148

Title: D ( ) Delete  
Name: BENJAMIN, KIP  
Address: 104 TEMPEST  
City-St-Zip: INTERLACHEN, FL 32148

Title: D ( ) Delete  
Name: DONOHOO, KATHY  
Address: PO BOX 965  
City-St-Zip: INTERLACHEN, FL 32148

Title: CD ( ) Delete  
Name: FABIAN, LOUIS  
Address: 122 GINGER LANE  
City-St-Zip: INTERLACHEN, FL 32148

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: C (X) Change ( ) Addition  
Name: TETZEL, VIVIAN L  
Address: 520 HIMALAYAN STREET  
City-St-Zip: INTERLACHEN, FL 32148 US

Title: CFO (X) Change ( ) Addition  
Name: CONNER, LOUISE M  
Address: 124 REAVES AVENUE  
City-St-Zip: INTERLACHEN, FL 32148 US

Title: T (X) Change ( ) Addition  
Name: WOODBURY, ANNETTE  
Address: 304 TROPIC AVENUE  
City-St-Zip: INTERLACHEN, FL 32148 US

Title: D (X) Change ( ) Addition  
Name: OWEN, NANCY  
Address: P.O.BOX 988, 105 SHORE SIDE LANE  
City-St-Zip: INTERLACHEN, FL 32148 US

Title: D (X) Change ( ) Addition  
Name: DONOHOO, KATHY  
Address: PO BOX 965  
City-St-Zip: INTERLACHEN, FL 32148 US

Title: CD (X) Change ( ) Addition  
Name: FABIAN, LOUIS JR  
Address: 122 GINGER LANE  
City-St-Zip: INTERLACHEN, FL 32148 US

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: LOUISE M. CONNER

CFO

04/13/2009

Electronic Signature of Signing Officer or Director

Date