

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748815

FILED  
Feb 11, 2009  
Secretary of State

**Entity Name:** THE FIRST PRESBYTERIAN CHURCH OF UMATILLA, FLORIDA

**Current Principal Place of Business:**

493 KENTUCKY AVE.  
P. O. BOX 407  
UMATILLA, FL 32784

**New Principal Place of Business:**

493 KENTUCKY AVE.  
UMATILLA, FL 32784

**Current Mailing Address:**

493 KENTUCKY AVE.  
P. O. BOX 407  
UMATILLA, FL 32784

**New Mailing Address:**

P.O. BOX 407  
UMATILLA, FL 32784

FEI Number: 59-1900137

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HASLEY, DOUGLAS E  
P.O. BOX 949  
43 MEBANE STREET  
UMATILLA, FL 327840949 US

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

HASLEY, DOUGLAS E  
43 MEBANE STREET  
UMATILLA, FL 327840949 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: \_\_\_\_\_

02/11/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SEABROOK, J. ELLIOTT  
Address: 40742 STATE RD 19  
City-St-Zip: UMATILLA, FL

Title: SD ( ) Delete  
Name: SEABROOK, SUSAN  
Address: 40742 STATE RD. 19  
City-St-Zip: UMATILLA, FL

Title: TD ( ) Delete  
Name: HASLEY, DOUGLAS E  
Address: P.O. BOX 949  
City-St-Zip: UMATILLA, FL 327840949

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

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

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: DOUGLAS E. HASLEY

TD

02/11/2009

Electronic Signature of Signing Officer or Director

Date