

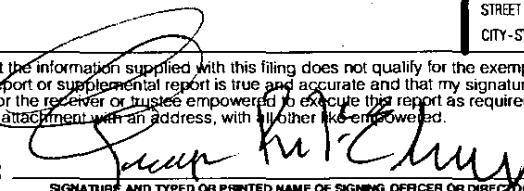


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2004 8:00 am
Secretary of State

02-20-2004 90002 017 ****61.25

DOCUMENT # 753596					
1. Entity Name FIRST PRESBYTERIAN CHURCH OF CRYSTAL RIVER, FLORIDA, INC.					
Principal Place of Business FIRST PRESBYTERIAN CHURCH 1501 SE HWY 19 CRYSTAL RIVER, FL 34429 US		Mailing Address 1501 SE HWY 19 1501 S.E. HWY.19 CRYSTAL RIVER, FL 34429 US		J4000007  02172004 Chg-NP CR2E037 (10/03)	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1002443	Applied For Not Applicable
6. Name and Address of Current Registered Agent MCELVY, GEORGE 1035 N. APPALACHIAN TERRACE CRYSTAL RIVER, FL 34429				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of New Registered Agent					
Name					
Street Address (P.O. Box Number is Not Acceptable)					
City				FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FARRIER, JAMES T		NAME	BROWN, ROBERT H.	
STREET ADDRESS	11930 W CREEKSIDE LANE		STREET ADDRESS	5970 W. WOODSIDE DR.	
CITY-ST-ZIP	HOMOSASSA, FL 34448		CITY-ST-ZIP	CRYSTAL RIVER, FL- 34429	
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WELCH, ELIZABETH		NAME	PARDUN, PATRICIA	
STREET ADDRESS	5 CYPRESS RUN #53C		STREET ADDRESS	5151 S. STEYSON PT. DRIVE	
CITY-ST-ZIP	HOMOSASSA, FL 34446		CITY-ST-ZIP	HOMOSASSA, FL 34448	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCNAIR, BILL		NAME		
STREET ADDRESS	3 LYSILOMA CT		STREET ADDRESS		
CITY-ST-ZIP	HOMOSASSA, FL 34446		CITY-ST-ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCELVY, GEORGE		NAME		
STREET ADDRESS	1035 N. APPALACHIAN TERRACE		STREET ADDRESS		
CITY-ST-ZIP	CRYSTAL RIVER, FL 34429		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 			Date: 2-17-04		Daytime Phone #: 352-795-1340
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
GEORGE MCELVY, TREASURER					