


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2008 8:00 am
Secretary of State

02-07-2008 90029 011 ****61.25

DOCUMENT # 753596 1. Entity Name FIRST PRESBYTERIAN CHURCH OF CRYSTAL RIVER, FLORIDA, INC.	
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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
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40020166



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01282008 Chg-NP CR2E037 (12/06)

4. FEI Number 59-1002443	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent FARRIER, JAMES 11930 W. CREEKSIDE LANE HOMOSASSA, FL 34448	
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7. Name and Address of New Registered Agent Name Robert Brown Street Address (P.O. Box Number is Not Acceptable) 5970 W. Woodside Drive Crystal River, City FL Zip Code 34429	
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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 <u>Robert H. Brown</u> ROBERT H. BROWN <u>1/30/08</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	
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Filing Fee is \$61.25 Due by May 1, 2008	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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FARRIER, JAMES T 11930 W CREEKSIDE LANE HOMOSASSA, FL 34448 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.D. Robert Brown <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5970 W. Woodside Drive Crystal River, FL 34429
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BROWN, ROBERT H 5980 W. WOODSIDE DR CRYSTAL RIVER, FL 34429 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.D. Ben Schaeffer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 10 Longleaf Ct. Homosassa, FL 34446
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PARDUN, PATRICIA 5151 S. STETSON PT. DRIVE HOMOSASSA, FL 34448 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S.D. Same <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DUMAS, BROWN 291 S. GARDENIA TERR. CRYSTAL RIVER, FL 34429 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T.D. Eda Holt <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4200 W. Pine Ridge Blvd. Beverly Hills, FL 34465
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 another like empowered. SIGNATURE: <u>Robert H. Brown</u> ROBERT H. BROWN <u>1-30-8</u> <u>795-1259</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #	
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