

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753787

FILED  
Jan 28, 2009  
Secretary of State

**Entity Name:** COMMUNITY PRESBYTERIAN CHURCH OF CLEWISTON, FLORIDA, IN THE UNITED STATES OF AMERICA

**Current Principal Place of Business:**

407 N. ROYAL PALM AVE.  
CLEWISTON, FL 33440

**New Principal Place of Business:**

**Current Mailing Address:**

407 N. ROYAL PALM AVE.  
CLEWISTON, FL 33440

**New Mailing Address:**

**FEI Number:** 59-2304073      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BLANFORD, VICTOR  
333 W. AZTEC AVE.  
CLEWISTON, FL 33440 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: V ( ) Delete  
Name: WILLIAMS, DAVID  
Address: 6700 SORRENCY RD  
City-St-Zip: CLEWISTON, FL 33440

Title: P ( ) Delete  
Name: BLANFORD, VICTOR  
Address: 333 W. AZTEC AVE.  
City-St-Zip: CLEWISTON, FL 33440

Title: S ( ) Delete  
Name: BROWN, ERLINDA  
Address: RT 3 BOX 903  
City-St-Zip: MOORE HAVEN, FL 33471

Title: D ( ) Delete  
Name: BLANFORD, ALICE  
Address: 333 W. AZTEC AVE.  
City-St-Zip: CLEWISTON, FL 33440

Title: D ( ) Delete  
Name: MARTIN, CURVIN  
Address: 417 ROYAL PALM AVE  
City-St-Zip: CLEWISTON, FL 33440

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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:

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

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

Title: T ( ) Change (X) Addition  
Name: CONSTABLE, SUSAN  
Address: 1435 HICPOCHEE BLVD  
City-St-Zip: MOORE HAVEN, FL 33471

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: SUSAN CONSTABLE

TREA

01/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date