2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754423

Apr 15, 2009 Secretary of State

Entity Name: PRESBYTERIAN CHURCH OF THE LAKES, INC. **Current Principal Place of Business: New Principal Place of Business:** 4700 LINCOLN AVENUE ORLANDO, FL 32819 **Current Mailing Address: New Mailing Address:** 4700 LINCOLN AVENUE ORLANDO, FL 32819 FEI Number: 59-2034828 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARQUI, MARY F 9600 AMBLESIDE DR WINDERMERE, FL 34786 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition SPRINGER, JENNIFER GIBSON, BILL Name: Name: 2604 STANTON HALL CT. Address: 7629 WETHERSFIELD DR. Address: City-St-Zip: WINDERMERE, FL 34786 US City-St-Zip: ORLANDO, FL 32819 US Title: () Delete Title: () Change () Addition Name: MARQUI, MARY F Name: Address: 9600 AMBLESIDE DR Address: City-St-Zip: WINDERMERE, FL 34786 City-St-Zip: Title: () Delete Title: () Change () Addition ANDERSON, SANDI Name: Name: Address: 6651 HIDDEN BEACH CIR Address: City-St-Zip: ORLANDO, FL 32819 US City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: ARMSTRONG, FRANK Name: BAILLIE, ROBIN 1953 MAJESTIC ELM BLVD. Address: 2150 TALL OAK DRIVE Address: City-St-Zip: WINTER GARDEN, FL 34787 US City-St-Zip: OCOEE, FL 34761 US Title: () Delete Title: (X) Change () Addition STROUD, DONNIE WYNN, DOTTI Name: Name: 4646 WOODLANDS VILLAGE DRIVE 1700 WINDERMERE DOWN PL. Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: WINDERMERE, FL 34786

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: ROBIN BAILLIE D 04/15/2009