2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757898

FILED Jan 29, 2008 Secretary of State

Entity Name: FELLOWSHIP PRESBYTERIAN CHURCH, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	AMROCK SOUTH ASSEE, FL 32309				
Current	Mailing Address:		New Mailing Addres	ss:	
	AMROCK SOUTH ASSEE, FL 32309				
FEI Numbe	er: 59-2344957 FE	l Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name an	d Address of Curre	nt Registered Agent:	Name and Address	of New Registered Agent:	
2785 EDI TALLAHA The abov	D, MARCIA L ENDERRY DRIVE ASSEE, FL 3230926 The named entity submote of Florida.		ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	JRE:				
	Electronic Si	gnature of Registered Age	ent	Date	
OFFICE	RS AND DIRECTOR	s:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () Delet KIDD, P. CASEY 6616 REIGH COUNT TALLAHASSEE, FL (TRAIL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () Delet VOIGT, SCOTT 2878 FROGS LEAP TALLAHASSEE, FL	WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delei DIXON, JEANNIE 2975 COMPTON WA TALLAHASSEE, FL: 3	Y	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delei PETFORD, MARCIA 2785 EDENDERRY I TALLAHASSEE, FL	L DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
	D () Delet		Title: Name:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BRANNON, HILLMAN 2841 O'HARA DRIVE		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: MARCIA L. PETFORD T 01/29/2008