2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Secretary of State **DOCUMENT # 763411** 03-15-2006 90119 004 ****61.25 1. Entity Name PALM SPRINGS PRESBYTERIAN CHURCH, INC. PPNALAAA Principal Place of Business Mailing Address 6491 W. 2ND AVE HIALEAH FL 33012 6491 W. 2ND AVE HIALEAH FL 33012 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite Ant #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 59-0944374 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KING, MIKE Street Address (P.O. Box Number is Not Acceptable) 333 MALLARD RD WESTON FL 33327 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 ed aperil and libe if approachie (NOTE: Roustered Agent signature received when revisitating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006: Trust Fund Contribution. П Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. Delete TITLE □ Change Addition HINER, BARBARA NAME NAME CLERK OF SESSION, 511 W 40TH PLACE STREET ADDRESS STREET ADDRESS HIALEAH FL 33012 CITY-ST-ZIP CITY-ST-ZIP ☐ Defete BILE IIILE ☐ Change ■ Addition MORALES, MARY NAME 1598 NW 208TH WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PEMBROKE PINES FL 33029 CITY-ST-ZIP TITLE Déleté TIFLE ☐ Add Tion EGGLESTON, JEANETTE NAME STREET ADDRESS 6560 W 24TH CT #14 STREET ADDRESS CITY-ST-ZIP HIALEAH FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME JONES, CAROLE NAME. 7635 W. 8TH AVE STREET ADDRESS STREET ADDRESS HIALEAH FL 33014 CITY-ST-ZIP CITY-ST-ZIP TITLE Detete ☐ Change Addition BARTOL, ISABEL NAME NAME 165 WEST 60TH ST. STREET ADDRESS STREET ADDRESS HIALEAH FL 33012 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition MANSO, FREDI HAME NAME 216 WEST 64TH TERRACE STREET ADDRESS STREET ADDRESS HIALEAH FL 33012 CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 1.19. 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.

FILED Mar 30, 2006 8:00 am