

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00580

FILED  
Jan 30, 2007  
Secretary of State

Entity Name: FIRST PRESBYTERIAN CHURCH OF OCALA, INC.

**Current Principal Place of Business:**

511 S.E. 3RD STREET  
OCALA, FL 34471 US

**New Principal Place of Business:**

**Current Mailing Address:**

511 S.E. 3RD STREET  
OCALA, FL 34471 US

**New Mailing Address:**

FEI Number: 59-0637844      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

STEDDOM, MARY B  
1701 S.E. FT. KING ST.  
OCALA, FL 33671 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: PD ( ) Delete  
Name: WINFREE, HOWELL  
Address: 1930 NE 49TH AVE.  
City-St-Zip: OCALA, FL 344701166

Title: SD ( ) Delete  
Name: ARLINE, JOHN W  
Address: 706 SE 15TH TERR  
City-St-Zip: OCALA, FL 34471

Title: T ( ) Delete  
Name: GOEDERT, SHERYLL  
Address: 2637 SE 28TH ST  
City-St-Zip: OCALA, FL 34471

Title: D ( ) Delete  
Name: VANDENBURGH, ANN  
Address: 1948 CLATTER BRIDGE RD  
City-St-Zip: OCALA, FL 34471

Title: D ( ) Delete  
Name: MORTHLAND, DIANE  
Address: 1771 SE 27TH LOOP  
City-St-Zip: OCALA, FL 34471

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: SHERYLL GOEDERT

T

01/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date