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Feb 09 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N03439** (9)

1. Corporation Name

FIRST PRESBYTERIAN CHURCH OF DEBARY, INC



Principal Place of Business 267 E HIGHBANKS RD DEBARY FL 32713 US	Mailing Address 267 E HIGHBANKS RD DEBARY FL 32713 US
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3. Date Incorporated or Qualified 06/04/1984
4. FEI Number 59-6046987
Applied For ☐ Not Applicable

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No N/A

9. Name and Address of Current Registered Agent WATTS, CARL A 2400 PINE TREE CIRCLE DRIVE ORANGE CITY FL 32763
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10. Name and Address of New Registered Agent 81 Name Preston, Bernard M. 82 Street Address (P.O. Box Number is Not Acceptable) 3021 Etta Circle 83 84 City Deltona FL 85 Zip Code 32738

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **President Bernard M. Preston** *[Signature]* **January 22, 1998**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	☒ DELETE	1.1 TITLE P	☐ Change ☒ Addition
NAME POWELL, RANDALL		1.2 NAME PRESTON, BERNARD M.	
STREET ADDRESS 257 CARMEN LANE		1.3 STREET ADDRESS 3021 Etta Circle	
CITY-ST-ZIP DEBARY FL		1.4 CITY-ST-ZIP Deltona, fl. 32738	
TITLE T	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME CLARK, JANET R.		2.2 NAME	
STREET ADDRESS 45 FORIDANA ROAD		2.3 STREET ADDRESS	
CITY-ST-ZIP DEBARY FL		2.4 CITY-ST-ZIP	
TITLE D	☒ DELETE	3.1 TITLE D	☐ Change ☒ Addition
NAME ATKINSON, JOHN		3.2 NAME Burlee, Shirley J.	
STREET ADDRESS 17 COSMO LANE		3.3 STREET ADDRESS 28 Jasmine Drive	
CITY-ST-ZIP DEBARY FL		3.4 CITY-ST-ZIP DeBary, Fl. 32713	
TITLE D	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME WATTS, CARL		4.2 NAME	
STREET ADDRESS 2400 PINE TREE CIRCLE DRIVE		4.3 STREET ADDRESS	
CITY-ST-ZIP ORANGE CITY FL		4.4 CITY-ST-ZIP	
TITLE D	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME CAMPBELL, HUGH		5.2 NAME	
STREET ADDRESS 206 MARGARITA ROAD		5.3 STREET ADDRESS	
CITY-ST-ZIP DEBARY FL		5.4 CITY-ST-ZIP	
TITLE S	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME JOHNSTON, ALICE S		6.2 NAME	
STREET ADDRESS 670 BISCAYNE DR.		6.3 STREET ADDRESS	
CITY-ST-ZIP ORANGE CITY FL		6.4 CITY-ST-ZIP	

1.1 TITLE P	☐ Change ☒ Addition
1.2 NAME PRESTON, BERNARD M.	
1.3 STREET ADDRESS 3021 Etta Circle	
1.4 CITY-ST-ZIP Deltona, fl. 32738	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE D	☐ Change ☒ Addition
3.2 NAME Burlee, Shirley J.	
3.3 STREET ADDRESS 28 Jasmine Drive	
3.4 CITY-ST-ZIP DeBary, Fl. 32713	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Alice S. Johnston** *[Signature]* **Jan 22 1998** **(904) 668-4495**

CR2E037 (10/97)