2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N06000008263

TI FILED
Oct 22, 2007
Secretary of State

Entity Name: GULFSTREAM PRESBYTERY INC.

Current Principal Place of Business: New Principal Place of Business:

217 AKRON AVENUE STUART, FL 34994

Current Mailing Address: New Mailing Address:

217 AKRON AVENUE STUART, FL 34994

FEI Number: 42-1695963 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:

BARTUSKA, PETER A 217 AKRON AVENUE STUART, FL 34994 U

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:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 SMITH, DIRK
 Name:
 VAN EYK, BERNIE

 Address:
 6678 HOLLANDAIRE DRIVE WEST
 Address:
 1875 NW BRITT RD

 City-St-Zip:
 BOCA RATON, FL 33433
 City-St-Zip:
 STUART, FL 34994

Title: VD () Delete Title: VD (X) Change () Addition

Name: DOWNING, LYNN Name: ROFF, LARRY Address: 2101 6TH AVF SOUTH

 Address:
 110 HALF MOON CIRCLE #C1
 Address:
 2101 6TH AVE SOUTH

 City-St-Zip:
 LANTANA, FL 33452
 City-St-Zip:
 LAKE WORTH, FL 33461

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 HOEKSTRA, CHARLES
 Name:
 STARKOSKI, SHAWN

 Address:
 714 SW 15TH ST
 Address:
 2703 N SEACREST BLVD

 City-St-Zip:
 BOYNTON BEACH, FL 33426
 City-St-Zip:
 DELRAY BEACH, FL 33444

Title: SD () Delete Title: () Change () Addition

 Name:
 BARTUSKA, PETER A
 Name:

 Address:
 217 AKRON AVENUE
 Address:

 City-St-Zip:
 STUART, FL 34994
 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: PETER BARTUSKA SD 10/22/2007