

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07012

FILED
Apr 19, 2008
Secretary of State

Entity Name: FIRST PRESBYTERIAN CHURCH OF MILTON, FLORIDA, INC.

Current Principal Place of Business:

5203 ELMIRA ST
MILTON, FL 32570 US

New Principal Place of Business:

Current Mailing Address:

5203 ELMIRA ST
MILTON, FL 32570 US

New Mailing Address:

FEI Number: 59-6565630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARMAN, JEANETTE
6000 JAY'S WAY
MILTON, FL 325709 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: C () Delete
Name: HARMAN, JEANETTE
Address: 6000 JAY'S WAY
City-St-Zip: MILTON, FL 32570

Title: T () Delete
Name: MCLACHLAN, GORDON
Address: 3921 HOLLEYBERRY LN
City-St-Zip: MILTON, FL 32583

Title: T () Delete
Name: HARMAN, ANNA
Address: 6000 JAY'S WAY
City-St-Zip: MILTON, FL 32570

Title: T () Delete
Name: NEUSTAEDTER, MARGARET
Address: 3117 COBBLESTONE DR
City-St-Zip: MILTON, FL 32571

Title: T () Delete
Name: BOHANNON, BESSIE
Address: 5334 ALABAMA ST
City-St-Zip: MILTON, FL 32570

Title: T (X) Delete
Name: HODGSON, JERRY
Address: 6336 W PARK AVE
City-St-Zip: MILTON, FL 32570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: LADE, LINDA
Address: 6016 PLAYERS PL
City-St-Zip: MILTON, FL 32570

Title: T (X) Change () Addition
Name: NEUSTAEDTER, MARGARET
Address: 3117 COBBLESTONE DR
City-St-Zip: PACE, FL 32571

Title: T (X) Change () Addition
Name: BOHANNON, BESSIE
Address: 5334 ALABAMA ST
City-St-Zip: MILTON, FL 32570

Title: T (X) Change () Addition
Name: HODGSON, JERRY
Address: 6336 W PARK AVE
City-St-Zip: MILTON, FL 32570

Title: () Change () Addition
Name:
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: JEANETTE HARMAN

CLER

04/19/2008

Electronic Signature of Signing Officer or Director

Date