

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 14, 2008
Secretary of State

DOCUMENT# N10074

Entity Name: FAITH PRESBYTERIAN CHURCH OF TALLAHASSEE, FLORIDA, INC.**Current Principal Place of Business:**C/O THOMAS P. BORLAND
2200 N. MERIDIAN ROAD
TALLAHASSEE, FL 32303 US**New Principal Place of Business:****Current Mailing Address:**C/O THOMAS P. BORLAND
2200 N. MERIDIAN ROAD
TALLAHASSEE, FL 32303 US**New Mailing Address:****FEI Number:** 59-0912690**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BORLAND, THOMAS P
3513 GALLAGHER DRIVE
TALLAHASSEE, FL 32309 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:** VPD () Delete
Name: MAYNE, GLENN
Address: 200 MILL BRANCH ROAD
City-St-Zip: TALLAHASSEE, FL 32312**Title:** SD () Delete
Name: CARROLL, MARY
Address: 520 SHORT STREET
City-St-Zip: TALLAHASSEE, FL 32308**Title:** TD () Delete
Name: DEAN, BOB
Address: 601 HILLCREST STREET
City-St-Zip: TALLAHASSEE, FL 32308**Title:** PD () Delete
Name: LESTER, SAM
Address: 2752 HANNON HIL DRIVE W.
City-St-Zip: TALLAHASSEE, FL 32309**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** SEC (X) Change () Addition
Name: MAYNE, GLENN
Address: 200 MILL BRANCH ROAD
City-St-Zip: TALLAHASSEE, FL 32312**Title:** VP (X) Change () Addition
Name: HARRISON, JIMBO
Address: 231 TIMBERLANE ROAD
City-St-Zip: TALLAHASSEE, FL 32312**Title:** TREA (X) Change () Addition
Name: DEAN, BOB
Address: 601 HILLCREST STREET
City-St-Zip: TALLAHASSEE, FL 32308**Title:** PRES (X) Change () Addition
Name: LESTER, SAM
Address: 2752 HANNON HIL DRIVE W.
City-St-Zip: TALLAHASSEE, FL 32309

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: KAREN HILL

CA

03/14/2008

Electronic Signature of Signing Officer or Director

Date