2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10074

FILED Mar 26, 2009 Secretary of State

Entity Name: FAITH PRESBYTERIAN CHURCH OF TALLAHASSEE, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: C/O THOMAS P. BORLAND 2200 N. MERIDIAN ROAD TALLAHASSEE, FL 32303 US **New Mailing Address: Current Mailing Address:** C/O THOMAS P. BORLAND 2200 N. MERIDIAN ROAD TALLAHASSEE, FL 32303 US FEI Number: 59-0912690 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: BORLAND, THOMAS P 3513 GALLAGHER DRIVE TALLAHASSEE, FL 32309 US 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: SEC () Delete () Change () Addition MAYNE, GLENN Name: Name: 200 MILL BRANCH ROAD Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: Title: Title: () Delete () Change () Addition HARRISON, JIMBO Name: Name: Address: 231 TIMBERLANE ROAD Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: Title: TREA () Delete Title: **TREA** (X) Change () Addition DEAN, BOB HARRIS, BUZ Name: Name: Address: 601 HILLCREST STREET Address: 1714 ARMISTEAD PLACE City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: TALLAHASSEE, FL 32308 () Delete Title: **PRES** Title: **PRES** (X) Change () Addition Name: LESTER, SAM Name: SHIPPEN BO Address: 2752 HANNON HIL DRIVE W. Address: 6259 BLACKFOX WAY City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32312

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: BO SHIPPEN PRES 03/26/2009