

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2006 8:00 am
Secretary of State

04-04-2006 90144 009 ****61.25

DOCUMENT # N12689

1. Entity Name

THE PRESBYTERIAN CHURCH OF SEVEN SPRINGS,
INC.



Principal Place of Business

% PETER BOYD THOMPSON
4651 LITTLE ROAD
NEW PORT RICHEY FL 34655-8329

Mailing Address

% PETER BOYD THOMPSON
4651 LITTLE ROAD
NEW PORT RICHEY FL 34655-8329



2. Principal Place of Business

% DOROTHY PADNE
Suite, Apt. #, etc.
4651 LITTLE ROAD
City & State
NEW PORT RICHEY FL

3. Mailing Address

% DOROTHY PADNE
Suite, Apt. #, etc.
4651 LITTLE ROAD
City & State
NEW PORT RICHEY FL

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2594925

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

THOMPSON, PETER BOYD
4651 LITTLE ROAD
NEW PORT RICHEY FL 34655

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Eleanor G. Hobbs

Treasurer

3/20/06

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE TT
NAME HOBBS, ELEANOR ☐ Delete
STREET ADDRESS 10909 JUSTICE DR
CITY-ST-ZIP PORT RICHEY FL 34668

TITLE PT
NAME WILHELM, JOHN ☒ Delete
STREET ADDRESS 15340 OLD DIXIE HWY
CITY-ST-ZIP HUDSON FL 34667

TITLE ST
NAME CASHEN, BRET ☒ Delete
STREET ADDRESS 4623 ADOAX DR
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE VT
NAME JOHNSON, KELLER ☒ Delete
STREET ADDRESS 1313 HICKORY MOSS PL
CITY-ST-ZIP TRINITY FL 34655

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE PT
NAME DAVID DE MERSEMAN ☐ Change ☒ Addition
STREET ADDRESS 12031 PENZANCE LN
CITY-ST-ZIP NEW PORT RICHEY FL 34654

TITLE ST
NAME GERALD JOHNSON ☐ Change ☒ Addition
STREET ADDRESS 1322 KINGS WAY LN
CITY-ST-ZIP TARPON SPRINGS FL 34688

TITLE VT
NAME HEATHER BREEZE ☐ Change ☒ Addition
STREET ADDRESS 8101 BLUE FINCH WAY
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *

Eleanor G. Hobbs Treasurer

3-14-06