## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N14739

1. Entity Name

DAYSPRING PRESBYTERIAN CHURCH, P.C.A. INC.



FILED Feb 14, 2004 08:00 AM Secretary of State

Principal Place of Business

6000 MARINER BLVD. SPRING HILL, FL 34609-8321 Mailing Address 6000 MARINER BLVD. SPRING HILL, FL 34609-8321



02042004 No Chg-NP

CR2E037 (10/03)

4. FEI Number	•	Applied For
59-2717906		Not Applicable
5. Certificate of Status Desired		\$8.75 Additional Fee Required

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HEDDLESON, RAY 6033 SUNDAY ROAD SPRING HILL, FL 34608

## DO NOT WRITE IN THIS SPACE

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						
	Filing Fee is \$61.25 Due by May 1, 2004	Election Campaign Finance     Trust Fund Contribution.	cing .	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRE	CTORS			·	
TITLE NAME STREET ADORESS CITY-ST-ZIP	D WALL, ROBERT 8008 MORELLI AVE BROOKSVILLE, FL 34613		:		U00000051283 02/16/04-80045-013 61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRIER, TED 1056 META ROAD MASARYKTOWN, FL 34604	-				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARSON, J E 3116 DOUBLE EAGLE CT SPRING HILL, FL 34606			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HEDDLESON, RAY 6033 SUNDAY ROAD SPRING HILL, FL 34608			IN .	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GLASSTETTER, DAVID 4365 5TH ISLE DR. SPRING HILL, FL 34607					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TOMPKINS, PAUL 10340 LACY STREET SPRING HILL, FL 34609					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information						

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Forida Statutes. 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 frustee employed 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** 

AY HEDDIESON AND STOCK OF SUPERIOR

Feb 4.2004(352)596 4279

Deytime Phone