

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2005 8:00 am
Secretary of State

02-02-2005 90062 007 ****61.25

DOCUMENT # N14739

1. Entity Name
DAYSPRING PRESBYTERIAN CHURCH, P.C.A. INC.



Principal Place of Business
**6000 MARINER BLVD.
SPRING HILL, FL 34609-8321**

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

50009825



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01242005

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-2717906

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HEDDLESON, RAY
6033 SUNDAY ROAD
SPRING HILL, FL 34608**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **WALL, ROBERT**
STREET ADDRESS **8008 MORELLI AVE**
CITY-ST-ZIP **BROOKSVILLE, FL 34613**

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

TITLE **D** ☐ Delete
NAME **DRIER, TED**
STREET ADDRESS **1056 META ROAD**
CITY-ST-ZIP **MASARYKTOWN, FL 34604**

TITLE **V** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **CARSON, J E**
STREET ADDRESS **3116 DOUBLE EAGLE CT**
CITY-ST-ZIP **SPRING HILL, FL 34606**

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

TITLE **SD** ☐ Delete
NAME **HEDDLESON, RAY**
STREET ADDRESS **6033 SUNDAY ROAD**
CITY-ST-ZIP **SPRING HILL, FL 34608**

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

TITLE **PD** ☒ Delete
NAME **GLASSTETTER, DAVID**
STREET ADDRESS **4365 5TH ISLE DR.**
CITY-ST-ZIP **SPRING HILL, FL 34607**

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

TITLE **VD** ☐ Delete
NAME **TOMPKINS, PAUL**
STREET ADDRESS **10340 LACY STREET**
CITY-ST-ZIP **SPRING HILL, FL 34609**

TITLE **P** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 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:

Ray Heddleson

RAY HEDDLESON, SD

Date

Jan 26, 2005 (352) 596-4279

Daytime Phone #