2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2005 8:00 am Secretary of State

1. Entity Name	MENT # N17398 RESBYTERIAN CHURCH C	F DESTIN, INC.			04-	29-2005	90240 046 **	**61.25	
154 CALHOUN AVENUE 154		Mailing Address 154 CALHOUN AVENUE DESTIN, FL 32541	154 CALHOUN AVENUE		ARIJ er de r 11211 i ng s a	: 4116 0 1010	/400B80 Anna acama		
2. Principal Place of Business 3.		3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		0208	2005 Chg-l	NP	CR2E037 (10/0	3)	
City & State		City & State			Number -1315299			Applied For Not Applicable	
Zip	Country	Zip	Country	5. Cer	tificate of Status	Desired	□ \$8.75 Fee Req	Additional uired	
	6. Name and Address of Current	Registered Agent		7. Nar	ne and Addres	of New Re	gistered Agent		
CVANC LE	- II A I		Name						
	EILA J. INA DRIVE LTON BEACH, FL 32547		Street Address ((P.O. Box Number is Not Acceptable)			
101111111	CTON BES (011, 1 E 0204)								
			City				FL Zip C	Code	
	named entity submits this statement for ions of registered agent.	or the purpose of changing its re	egistered office o	r registered ageni	t, or both, in the	State of Flor	ida. I am familiar w	rith, and accept	
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signat	ure required when reins	aling)		DATE		
SIGNATURE .	Signature, typed or printed name of registared agent Filling Fee is \$61.25 Due by May 1, 2005	9. Election Camp Trust Fund Co	paign Financing	\$5.00	May Be o Fees	Florid	ike check payab da Department o	f State	
SIGNATURE .	Filing Fee is \$61.25	9. Election Camp Trust Fund Co	paign Financing	\$5.00	May Be o Fees	Florid	ike check payab da Department o	f State	
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10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND DI DP EVANS, LEILA J 2403 MARINA DRIVE	9. Election Camp Trust Fund Co	paign Financing ontribution. 11. 11TLE NAME STREET ADDRESS	TRUSTEE \$5.00 Added to TRUSTEE TRUSTEE TRUSTEE	May Be o Fees NS/CHANGES LORA ility Lane L 32541	Florio O OFFICER	ake check payable to be checked a Department o	f State S IN 10 ge	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND DID DP EVANS, LEILA J 2403 MARINA DRIVE FT. WALTON BCH, FL 32547 TR	9. Election Camp Trust Fund Co RECTORS	paign Financing partibution. 11. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	\$5.00 Added to TRUSTEETICK CHAMBERS, 113 Traqu Destin, F TRUSTEE LAYMAN, S	May Be o Fees NS/CHANGES LORA ility Lane L 32541	Florio	ke check payable da Department o	f State S IN 10 ge	
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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 attactment with an address, with all other like empowered. TRILA J. EVANS

Coans RINTED NAME OF SIGNING OFFICER OR DIRECTOR

850/837-6425 4/28/05