2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jul 10, 2008 DOCUMENT# N18258 Secretary of State

Entity Name: THE PINEDA PRESBYTERIAN CHURCH OF MELBOURNE, INC.

Current Principal Place of Business: New Principal Place of Business:

5650 NORTH WICKHAM ROAD MELBOURNE, FL 32940

Current Mailing Address: New Mailing Address:

5650 NORTH WICKHAM ROAD MELBOURNE, FL 32940

FEI Number: 59-2507276 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:

IRWIN, VIRGINIA E SECRETA IRWIN, VIRGINIA TREASUR 1028 WIMBLEDON DRIVE 1028 WIMBLETON DRIVE MELBOURNE, FL 32940 MELBOURNE, FL 32940

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: V. IRWIN 07/10/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition DICKINSON, FRANK JOYNES, THOMAS Name: Name:

403 HWY A1A #243 Address: 5442 EMMA LAKE COURT Address: City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: MELBOURNE, FL 32934

(X) Change () Addition Title: () Delete Title: TREA Name: SHUMAKER, KAREN Name: IRWIN, VIRGINIA

Address: 813 HOGAN WAY Address: 1028 WIMBLEDON DRIVE City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940

Title: () Delete Title: SECR (X) Change () Addition

TODSEN, PETER B Name: ZINN, PATRICIA Name: 1031 LENNOX AVENUE Address: 1030 CONTINENTAL AVE Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940

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: V. IRWIN **TREA** 07/10/2008