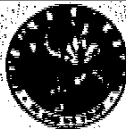


**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

**APPROVED  
AND  
FILED**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

95 APR 27 AM 11:46

**DOCUMENT # N18954 (0)**  
1. Corporation Name  
**FIRST PRESBYTERIAN CHURCH OF PUNTA GORDA, FLORID  
A, INC.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
**115 HARVEY ST  
PUNTA GORDA FL 33960** **115 HARVEY ST  
PUNTA GORDA FL 33960**

3. Date Incorporated or Qualified **01/27/1987** 3a. Date of Last Report **04/25/1994**  
4. FEI Number **59-2399223** Applied For  
Not Applicable

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

5. Certificate of Status Desired  **\$8.75 Additional  
Fee Required**  
6. Election Campaign Financing  
Trust Fund Contribution  **\$5.00 May Be  
Added to Fees**  
7. Nonprofit with IRS 501(c)(3)  
Tax Exempt Status  **\$68.75 Supplemental  
Fee Not Required**  
8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**LATTA, JAMES N.  
115 HARVEY ST.  
PUNTA GORDA FL 33950**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when resigning) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD KISKADDON, ROBERT 708 MACEDONIA DR PUNTA GORDA FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D MEISSNER, CLAU 900 DON JAUN COURT PUNTA GORDA FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD HOFFMAN, GEORGE 3500 DIPPER PUNTA GORDA FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T SHORE, RUTH G 526 VIA CINTIA PUNTA GORDA FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD CHRISTEN, ROY 920 LUCIA DR PUNTA GORDA FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D RESS, MARLYN 10024 SW RIVERVIEW CIR ARCADIA FL</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<b>VD Barrett, Alice 1225 Neapolitan Rd Punta Gorda FL 33983</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<b>D Brandt, Robert 508 Rio de Janeiro Ave Punta Gorda FL 33950</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<b>D Cleffi, Emma Jean 945 Bal Harbor Blvd Punta Gorda FL 33950</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Ruth G. Shore, Ruth G. Shore, Treasurer April 24, 1995 (813)639-1959  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



Established 1895

W18954  
*First Presbyterian Church*

115 Harvey Street  
Punta Gorda, Florida 33950  
839-1959

Corporation Annual Report 1995 continued

Page 2.

Officers and Directors

D  
Gahley, Eunice  
25188 E Marion Ave - D104  
Punta Gorda FL 33950

D  
Kiskaddon, Robert  
708 Macedonia Dr  
Punta Gorda FL 33950

D  
Merrill, Jerry  
900 Bal Harbor Blvd  
Punta Gorda FL 33950

D  
Stokes, Lloyd  
3830 Bal Harbor Blvd - 16  
Punta Gorda FL 33950

D  
Sutton, Inez  
252 Hernando Ave  
Port Charlotte FL 33952

D  
Williams, Lindsey  
1318 San Mateo  
Punta Gorda FL 33950

D  
Waters, Marjory  
1205 Via Tripoli  
Punta Gorda FL 33950