FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 APR 20 PM 12:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N19602** **(4)**

1. Corporation Name

PROVIDENCE PRESBYTERIAN CHURCH OF WEST PALM BEACH, INC.

Principal Place of Business
869 OVERBROOK PL
WEST PALM BEACH FL 33413

Mailing Address
869 OVERBROOK PL
WEST PALM BEACH FL 33413

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/09/1987
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2789856 — Applied For / Not Applicable

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

HARMAN, GLENN, G
869 OVERBROOK PLACE
WEST PALM BEACH FL 33413

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 office 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VD	1.1 TITLE	VD	☒ Change ☐ Addition
NAME	ROULEAU, GLADYS	1.2 NAME	Rich, Melanie	
STREET ADDRESS	1548 DREXEL RD	1.3 STREET ADDRESS	5656 Cadillac Dr.	
CITY-ST-ZIP	WEST PALM BEACH FL	1.4 CITY-ST-ZIP	Lake Worth, FL	
TITLE	SD	2.1 TITLE	SD	☒ Change ☐ Addition
NAME	KLEIN, MADELINE	2.2 NAME	Rich, Zelma	
STREET ADDRESS	4327 WILLOW BROOK CIRCLE	2.3 STREET ADDRESS	137 Greenbriar Drive	
CITY-ST-ZIP	WEST PALM BEACH FL	2.4 CITY-ST-ZIP	Palm Springs, FL	
TITLE	TD	3.1 TITLE	PD	☐ Change ☒ Addition
NAME	BARKER, ANN	3.2 NAME	Barnes, Paul D.	
STREET ADDRESS	817 ASPEN RD	3.3 STREET ADDRESS	1025 Paseo Andora	
CITY-ST-ZIP	WEST PALM BEACH FL	3.4 CITY-ST-ZIP	West Palm Beach, FL	
TITLE		4.1 TITLE	TD	☐ Change ☒ Addition
NAME		4.2 NAME	Harman, Glenn G.	
STREET ADDRESS		4.3 STREET ADDRESS	869 Overbrook Pl.	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	West Palm Beach, FL	
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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: Glenn G. Harman — Glenn G. Harman — 4/15/'95 — (407) 686-1192
SIGNATURE AND TYPED OR PRINTED NAME OF MORNING OFFICER OR DIRECTOR — Date — Daytime Phone #