

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED

May 01 1996 8:00 am
Secretary of State

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

3. Date Incorporated or Qualified
03/09/1987

3a. Date of Last Report
04/20/1995

2. Principal Place of Business WORSHIP AT:

2a. Mailing Address

21 100 Ponce De Leon Street

26 P. O. Box 20272

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 Royal Palm Beach FL

28 West Palm Beach FL

Zip

Country

Zip

Country

24 33411

25 Palm Beach

29 33416

30 Palm Beach

4. FEI Number
59-2789856

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name
Ralph H. Mittendorff

82 Street Address (P.O. Box Number is Not Acceptable)
5555 North Federal Highway

83 Fort Lauderdale

84 City
Fort Lauderdale

85 Zip Code
FL 33308

11. I, pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Ralph H. Mittendorff, Treasurer

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

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE
NAME RICH, MELANIE
STREET ADDRESS 5656 CADILLAC DR
CITY - ST - ZIP LAKE WORTH FL

TITLE ☒ DELETE
NAME RICH, ZELMA
STREET ADDRESS 137 GREENBRIAR DR
CITY - ST - ZIP PALM SPRINGS FL

TITLE ☒ DELETE
NAME BARKER, ANN
STREET ADDRESS 817 ASPEN RD
CITY - ST - ZIP WEST PALM BEACH FL

TITLE ☒ DELETE
NAME BARNES, PAUL D.
STREET ADDRESS 1025 PASEO ANDORA
CITY - ST - ZIP WEST PALM BEACH FL

TITLE ☒ DELETE
NAME HARMAN, GLENN G.
STREET ADDRESS 869 OVERBROOK PL.
CITY - ST - ZIP WEST PALM BEACH FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D Teaching Elder, Sr. Minister
1.2 NAME Rev. Charles J. Baldini
1.3 STREET ADDRESS 4300 Washington Road
1.4 CITY - ST - ZIP West Palm Beach FL 33405 ☐ Change ☒ Addition

2.1 TITLE D Teaching Elder
2.2 NAME Dr. Robert L. Reymond
2.3 STREET ADDRESS 5554 North Federal Highway
2.4 CITY - ST - ZIP Fort Lauderdale FL 33308 ☐ Change ☒ Addition

3.1 TITLE D Ruling Elder
3.2 NAME Ralph H. Mittendorff
3.3 STREET ADDRESS 5555 North Federal Highway
3.4 CITY - ST - ZIP Fort Lauderdale FL 33308 ☐ Change ☒ Addition

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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: Ralph H. Mittendorff

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96 954-771-8841,
Daytime Phone ext. 240

CR2E037 (12/95)