

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 06, 2009
Secretary of State**

DOCUMENT# N19616

Entity Name: FIRST PRESBYTERIAN CHURCH OF SEBASTIAN, INCORPORATED

Current Principal Place of Business:

1405 LOUISIANA AVE
P.O. BOX 781689
SEBASTIAN, FL 329788689

New Principal Place of Business:

1405 LOUISIANA AVE
SEBASTIAN, FL 329781689

Current Mailing Address:

1405 LOUISIANA AVE
P.O. BOX 781689
SEBASTIAN, FL 329788689

New Mailing Address:

1405 LOUISIANA AVE
P.O. BOX 781689
SEBASTIAN, FL 329781689

FEI Number: 59-2734445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPO, JANE
301 JETTIE TERRAC
SEBASTIAN, FL 32958 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: EDS () Delete
Name: CAPO, JANE
Address: 301 JETTIE TERRACE
City-St-Zip: SEBASTIAN, FL 32958

Title: EDT () Delete
Name: LEA, BRUCE
Address: 103 HARBOR POINT DR
City-St-Zip: SEBASTIAN, FL 32958

Title: EDVP () Delete
Name: EARNSHAW, VIRGINIA
Address: 591 REDWOOD CT
City-St-Zip: SEBASTIAN, FL 32958

Title: EDP () Delete
Name: NAFZIGER, JUDY
Address: 420 CHALOUPPE TERRACE
City-St-Zip: SEBASTIAN, FL 32958

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JANE CAPO

MS.

01/06/2009

Electronic Signature of Signing Officer or Director

Date