

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19958

FILED  
Mar 20, 2009  
Secretary of State

**Entity Name:** THE FIRST CONGREGATIONAL UNITED CHURCH OF CHRIST OF LAKE HELEN, INC.

**Current Principal Place of Business:**

107 S. EUCLID AVENUE  
LAKE HELEN, FL 32744

**New Principal Place of Business:**

**Current Mailing Address:**

107 S. EUCLID AVENUE  
LAKE HELEN, FL 32744

**New Mailing Address:**

107 N. EUCLID AVENUE  
LAKE HELEN, FL 32744

**FEI Number:** 59-6195447

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PEAKE, CHAPELL  
132 CYPRESS CIRCLE  
LAKE HELEN, FL 32744 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: D ( ) Delete  
Name: HUGHES, MICHAEL  
Address: 386 NORTH LAKEVIEW DRIVE  
City-St-Zip: LAKE HELEN, FL 32744

Title: D ( ) Delete  
Name: DAVIS, JAMES  
Address: 2607 S. WOODLAND BLVD-PMB 170  
City-St-Zip: DELAND, FL 32720

Title: D ( ) Delete  
Name: LONG, LEWIS C III  
Address: 176 NORTH EXCLID AVENUE  
City-St-Zip: LAKE HELEN, FL 32744

Title: P ( ) Delete  
Name: LONG, CARYN  
Address: 176 N. EUCLID AVE  
City-St-Zip: LAKE HELEN, FL 32744

Title: T ( ) Delete  
Name: OREUTT, WILLIAM  
Address: 564 BELLTOWER AVENUE  
City-St-Zip: DELTONA, FL 32725

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: WINNECKE, ANDREW  
Address: 3031 BLAINE CIRCLE  
City-St-Zip: DELTONA, FL 32738

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

Title: D (X) Change ( ) Addition  
Name: WINNECKE, NANCY  
Address: 3031 BLAINE CIRCLE  
City-St-Zip: DELTONA, FL 32738

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

Title: T (X) Change ( ) Addition  
Name: CROKER, SANDY  
Address: 715 RAVENS HILL WAY  
City-St-Zip: DELAND, FL 32724

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: SANDY CROCKER

T

03/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date