

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 20, 2009
Secretary of State**

DOCUMENT# N23513

Entity Name: THE PEACE PRESBYTERIAN CHURCH OF STUART, INC.

Current Principal Place of Business:

4881 S.E. COVE RD
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

4881 S.E. COVE RD
STUART, FL 34997 US

New Mailing Address:

FEI Number: 59-2796102 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAILEY, JAMES L
4626 GASTONIA STREET
PORT ST. LUCIE, FL 34997 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: PD () Delete
Name: CRESWELL, JOHN
Address: 4459 SE KUBIN AVE
City-St-Zip: STUART, FL 34997

Title: VP () Delete
Name: SIMBRITZ, AL
Address: 1874 SW OAKWATER PLACE
City-St-Zip: PALM CITY, FL 34990

Title: T () Delete
Name: LEMASTER, ELEANOR
Address: 5331 SE NASSAU TERRACE
City-St-Zip: STUART, FL 34997

Title: SD () Delete
Name: LOGAN, JANE
Address: 7622 SE DOVE STREET
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: HICKS, SANDRA N
Address: 5271 SE SEA ISLAND WAY
City-St-Zip: STUART, FL 34997

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: SANDRA N. HICKS

TRES

03/20/2009

Electronic Signature of Signing Officer or Director

Date