


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 10, 2005 08:00 AM
Secretary of State

DOCUMENT # N23900 1. Entity Name CORNERSTONE PRESBYTERIAN CHURCH, INC.	
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Principal Place of Business 2904 KERRY FOREST PARKWAY TALLAHASSEE, FL 32308	Mailing Address 2904 KERRY FOREST PARKWAY TALLAHASSEE, FL 32308
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01202005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2654627	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent DAVIS, CECIL L. 101 NORTH MONROE STREET SUITE 950 TALLAHASSEE, FL 32302

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

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

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CVD DAVIS, ROBERT 6521 ALAN-A DALE TALLAHASSEE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FELDMAN, RICK 6477 BROADTREE STREET TALLAHASSEE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WILKINSON, ROBERT RT 3 BOX 414 HAVANA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HAWKS, RONALD 2197 WOODBINE DR. TALLAHASSEE, FL 32303
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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05/10/05-80001-003 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard G. Feldman 5/9/05 850-528-7225
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #