

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26251

FILED  
Mar 13, 2008  
Secretary of State

**Entity Name:** FIRST CONGREGATIONAL U.C.C., OF FORT PIERCE, INC.

**Current Principal Place of Business:**

3601 KIRBY LOOP ROAD  
FT. PIERCE, FL 34981

**New Principal Place of Business:**

**Current Mailing Address:**

3601 KIRBY LOOP ROAD  
FT. PIERCE, FL 34981

**New Mailing Address:**

**FEI Number:** 42-1748918      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WEBB, CHARLES D  
2400 S OCEAN DR APT 6115  
FORT PIERCE, FL 34949 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: P ( ) Delete  
Name: MAYBURY, TOM  
Address: 2400 SOUTH OCEAN DRIVE APT 3841  
City-St-Zip: FORT PIERCE, FL 34949

Title: T ( ) Delete  
Name: WEBB, CHARLES D  
Address: 2400 S OCEAN DR APT 6115  
City-St-Zip: FORT PIERCE, FL 34949

Title: S ( ) Delete  
Name: SINOTTE, CAROL  
Address: 6705 SALERNO ROAD  
City-St-Zip: FORT PIERCE, FL 34951

Title: TR ( ) Delete  
Name: BATER, ROBERT  
Address: 4403 ARECA PALM DR  
City-St-Zip: FORT PIERCE, FL 34982

Title: TR ( ) Delete  
Name: LOCKE, DONALD I  
Address: 5803 GREEN DOLPHIN STREET  
City-St-Zip: FORT PIERCE, FL 34951

Title: TR ( ) Delete  
Name: HOWER, KENNETH  
Address: 2400 S OCEAN DR APT 7643  
City-St-Zip: FORT PIERCE, FL 34949

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

Title: P (X) Change ( ) Addition  
Name: MAYBURY, TOM  
Address: 2063 GREY FALCON CIR SW  
City-St-Zip: VERO BEACH, FL 32962

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

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

Title: TR (X) Change ( ) Addition  
Name: SOUZA, JOHN  
Address: 4 JOSE MARTIN  
City-St-Zip: FORT PIERCE, FL 34951

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: CHARLES D WEBB

T

03/13/2008

Electronic Signature of Signing Officer or Director

Date