

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N26310** (5)

1. Corporation Name

**FIRST PRESBYTERIAN CHURCH OF SARASOTA, FLORIDA, INC.**



Principal Place of Business

Mailing Address

2050 OAK STREET  
SARASOTA FL 34237

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SARASOTA FL 34237  
US

3. Date Incorporated or Qualified  
**05/06/1988**

3a. Date of Last Report  
**03/02/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number  
**59-0751920**

Applied For  
Not Applicable

Suite, Apt #, etc.

Suite, Apt #, etc.

22

27

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

City & State

City & State

23

28

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

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**EASTMOORE, THEODORE C.  
1777 MAIN STREET  
SARASOTA FL 34236**

81 Name **ARBUCKLE, WILLIAM I., II**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**2050 Oak Street**  
83  
84 City **SARASOTA** FL 85 Zip Code **34237**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

*William I. ARBUCKLE II* *Wm I. Ar buckle*

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent's signature is required when resigning.)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> DELETE
PD	BARKLEY, ROBERT O	2450 HARBOURSIDE DRIVE	LONGBOAT KEY FL	<input checked="" type="checkbox"/>
TD	JACKSON, JAMES R	2603 SUNNYSIDE ST.	SARASOTA FL	<input checked="" type="checkbox"/>
SD	MCFADYEN, AL R SR.	436 58TH ST.	SARASOTA FL	<input checked="" type="checkbox"/>
D	BAUM, RICHARD W	2045 GULF OF MEXICO DRIVE	LONGBOAT KEY FL	<input checked="" type="checkbox"/>
D	SCHAUB, VALERIE J	1938 RINGLING BOULEVARD	SARASOTA FL	<input checked="" type="checkbox"/>
D	MORRISON, CRAIG	3338 SANDLEHEATH ROAD	SARASOTA FL	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
P/D	ARBUCKLE, WILLIAM I., II	6694 Schooner Bay Circle	SARASOTA, FL 34231-8854	<input checked="" type="checkbox"/>
S/D	LINDSLEY, ROBERT O.	1863 Buccaneer Court	SARASOTA, FL 34231-5403	<input checked="" type="checkbox"/>
D	OSBORNE, ROBERT F.	6729 Ashley Court	SARASOTA, FL 34241-9319	<input checked="" type="checkbox"/>
D	DONALDSON, ROBERT S.	745 Bayport Way	LONGBOAT KEY, FL 34228	<input checked="" type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

*William I. ARBUCKLE II* *William I. Ar buckle*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **4/4/96** Date: \_\_\_\_\_

CR2E037 (12/95)