


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 27, 2006 08:00 AM
Secretary of State

DOCUMENT # N37145 1. Entity Name MIDDLEBURG PRESBYTERIAN CHURCH, INC.	
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Principal Place of Business 4564 ROSEMARY STREET MIDDLEBURG, FL 32068 US	Mailing Address P.O. BOX 772 MIDDLEBURG, FL 32050 US
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07222006 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2786754	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BEARDEN, DOTTIE 4564 ROSEMARY STREET MIDDLEBURG, FL 32068

**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 *Dorothy Bearden*

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

(NOTE: Registered Agent signature required when reinstating)

7-23-06
DATE

**Filing Fee is \$61.25
Due by September 8, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

U00000572467
07/27/06-80005-015 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	ELDR GOODWIN, NANCY 4564 ROSEMARY ST. MIDDLEBURG, FL 32068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ELDR CHRISTIAN, EARL 4564 ROSEMARY ST. MIDDLEBURG, FL 32065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ELDR DULLS, CLEO 4564 ROSEMARY ST. MIDDLEBURG, FL 32068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ELDR WRIGHT, ROSA 4564 ROSEMARY ST MIDDLEBURG, FL 32068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ELDR TOUW, MARTHA 4564 ROSEMARY ST MIDDLEBURG, FL 32068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ELDR BEARDEN, DOTTIE 4564 ROSEMARY ST MIDDLEBURG, FL 32068

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Jane K Brown*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-23-06
Date

904 282-0130
Daytime Phone #