2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N39311

1. Entity Name
THE PRESBYTERY OF SOUTHWEST FLORIDA
(PRESBYTERIAN CHURCH IN AMERICA), INC.



FILED Feb 22, 2007 08:00 AM **Secretary of State**

Principal Place of Business 495 S. RANDOLPH RD VENICE, FL 34293 US Mailing Address

614 BEVERLY DR BRANDON, FL 33510



DO NOT WRITE IN THIS SPACE

02152007 No Chg-NP CR2E037 (4/06)

4. FEI Number Applied For 65-0211055 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

DARDEN, HENRY R 614 BEVERLY DR BRANDON, FL 33510

SIGNATURE:

DO NOT WRITE IN THIS SPACE

the above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of riorida. Fam latitude with, and accept the obligations of registered agent. Signature: Signature, types or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rematating) DATE						
	Filing Fee In \$61,28 Due by May 1, 2007	9. Election Campa Trust Fund Con	aign Financing	\$5.00 May Be Added to Fees	U00000644434 03/02/07-80042-003 61.25	
10.	OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD OWENS, JEAN V 13003 WATERFORD RUN DR RIVERVIEW, FL 33569					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DOLBY, DWIGH 495 RANDOLPH ROAD VENICE, FL 34293					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DARDEN, HENRY R 614 BEVERLY DR BRANDON, FL 33510			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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 trusted 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.						