

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47528

FILED  
Jan 31, 2012  
Secretary of State

**Entity Name:** MCINTOSH PRESBYTERIAN CHURCH, INC.

**Current Principal Place of Business:**

5825 AVE F  
MCINTOSH, FL 32664

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 385  
MCINTOSH, FL 32664

**New Mailing Address:**

**FEI Number:** 59-3426002

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BATES, C. VALENTINE  
1511 NW 6 STREET  
GAINESVILLE, FL 32601 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: SD  
Name: GILLIAM, KAREN  
Address: 4551 NW 35TH ROAD  
City-St-Zip: GAINESVILLE, FL 32606

Title: TD  
Name: LEVINE, ALEIDA  
Address: 19030 NW 112 CT  
City-St-Zip: MICANOPY, FL 32667

Title: SD  
Name: MCCOLLUM, LINDA  
Address: HWY 441  
City-St-Zip: MCINTOSH, FL 32664

Title: SD  
Name: ELLIS, RALPH  
Address: 5014 NW 102ND PL  
City-St-Zip: GAINESVILLE, FL 32653

Title: SD  
Name: PIERPONT, EARL C III  
Address: 15572 NW 86TH AVE  
City-St-Zip: REDDICK, FL 32686

Title: SD  
Name: MORRIS, JOHN G  
Address: 17616 VETERANS WAY  
City-St-Zip: MICANOPY, FL 32667

I hereby 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 all other like empowered.

SIGNATURE: ALEIDA LEVINE

TRES

01/31/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date