


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2006 8:00 am
Secretary of State

03-21-2006 90045 002 ****61.25

DOCUMENT # N50348	
1. Entity Name WEIRSDALE PRESBYTERIAN CHURCH, INC.	

Principal Place of Business 16303 SE 137TH COURT WEIRSDALE, FL 32195-0269 US	Mailing Address P.O. BOX 269 WEIRSDALE, FL 32195-0269 US
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50004099



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

02162006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-1620006	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent BOYER, KAYE 16303 SE 137TH CT. WEIRSDALE, FL 32195-0269		7. Name and Address of New Registered Agent Name Willet Boyer, Jr. Street Address (P.O. Box Number is Not Acceptable) 16303 SE 137th Court City Weirsdale FL Zip Code 32195	
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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  **3-2-06**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOYER, WILLET JR P.O. BOX 527 WEIRSDALE, FL 32195 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINGATE, CHESTER 12762 SE 92 TER SUMMERFIELD, FL 34491 <input checked="" type="checkbox"/> Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Ray Oille <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 8465 SE 177th Tremont ST The Villages, FL 32162-2897
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SKOFF, KENNETH 9301 SE 126TH ST SUMMERFIELD, FL 34491 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORDLE, KENNETH 6100 SE 125TH PL BELLEVIEW, FL 34420 <input type="checkbox"/> Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Frances Knoizen <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition P. O. Box 26 Weirsdale, FL 32195-0026
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCEUEN, BETTY P.O. BOX 612 SUMMERFIELD, FL 34491 <input type="checkbox"/> Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Don Kroes <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 13365 SE 97th Terrace Road Summerfield, FL 34491-5786
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIPSNER, ROBERT 9255 SE 120 LOOP SUMMERFIELD, FL 34491 <input checked="" type="checkbox"/> Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Charles Woodward <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 833 Bolivar Street Lady Lake, FL 32159-5716

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:  **3-2-06 352-821-2757**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #