

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51226

FILED
Mar 17, 2005
Secretary of State

Entity Name: FIRST PRESBYTERIAN CHURCH (U.S.A.) OF LYNN HAVEN, FLORIDA, INC.

Current Principal Place of Business:

810 GEORGIA AVENUE
LYNN HAVEN, FL 32444

New Principal Place of Business:

Current Mailing Address:

810 GEORGIA AVE
LYNN HAVEN, FL 32444 US

New Mailing Address:

FEI Number: 59-0838094

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEITH, FRED L. DR. REV.
810 GEORGIA AVENUE
LYNN HAVEN, FL 32444 US

Name and Address of New Registered Agent:

FIRST PRESBYTERIAN CHURCH OF LYNN HAVEN
810 GEORGIA AVENUE
LYNN HAVEN, FL 32444 US

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: JACQUELIN PATTERSON

03/17/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FRANEY, JAMES
Address: 314 WAHOO RD
City-St-Zip: PANAMA CITY, FL 32411

Title: D () Delete
Name: HOLLEY, RICHARD
Address: 1104 CAROLINA AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

Title: D () Delete
Name: KANGAS, RICH
Address: 1124 HARVARD BLVD.
City-St-Zip: LYNN HAVEN, FL 32444

Title: D (X) Delete
Name: YOUNT, JOYCE
Address: 2128 SQUIRRELL RUN
City-St-Zip: LYNN HAVEN, FL 32444

Title: D (X) Delete
Name: SPENCER, LES
Address: 1341 CAPRI DR
City-St-Zip: PANAMA CITY, FL 32405

Title: STD (X) Delete
Name: PATTERSON, JACKIE,
Address: 2139 TRINITY ST
City-St-Zip: LYNN HAVEN, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COOLEY, DAVID MR.
Address: 206 GEORGIA AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

Title: S (X) Change () Addition
Name: FILIPPI, SANDRA MRS.
Address: 1503 LOBLOLLY LANE
City-St-Zip: LYNN HAVEN, FL 32444

Title: T (X) Change () Addition
Name: PATTERSON, JACKIE MRS.
Address: 4016 WOODRIDGE ROAD
City-St-Zip: LYNN HAVEN, FL 32444

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JACQUELIN PATTERSON

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03/17/2005

Electronic Signature of Signing Officer or Director

Date