

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51226

FILED
Feb 10, 2009
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 AVENUE
LYNN HAVEN, FL 32444

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:

FIRST PRESBYTERIAN CHURCH OF LYNN HAVEN
810 GEORGIA AVENUE
LYNN HAVEN, FL 32444 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: P () Delete
Name: MILLER, JERRY MR.
Address: 3622 BAY TREE ROAD
City-St-Zip: LYNN HAVEN, FL 32444

Title: VP () Delete
Name: PENNINGTON, MARY ANN MRS.
Address: 3030 MEADOW STREET
City-St-Zip: LYNN HAVEN, FL 32404

Title: T () Delete
Name: COOLEY, JANET MRS.
Address: 206 GEORGIA AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEONARD, JAMES MR.
Address: 2116 COUNTRY CLUB DRIVE
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 exemption stated 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 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: JANET COOLEY

MRS.

02/10/2009

Electronic Signature of Signing Officer or Director

Date