

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000001403 (5)

1. Corporation Name

FIRST PRESBYTERIAN CHURCH OF DELAND, FLORIDA, INC.



Principal Place of Business

Mailing Address

724 N. WOODLAND BLVD.
DELAND FL 32720

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DELAND FL 32720

3. Date Incorporated or Qualified
03/29/1993

3a. Date of Last Report
05/23/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-0838091

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

23

28

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILEY, CLYDE M JR
724 N. WOODLAND BLVD.
DELAND FL 32720

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Clyde M Wiley
Signature typed or printed name of registered agent and not applicable

(NOTE: Registered Agent signature required when reinstating)

3-8-96
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME BRAKEMAN, LOUIS F.
STREET ADDRESS 522 PRINCEWOOD DRIVE
CITY-ST-ZIP DELAND FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D ☒ DELETE
NAME PEGRAM, ALICE
STREET ADDRESS 125 S. WESTWOOD
CITY-ST-ZIP DELAND FL 32720

2.1 TITLE ☒ Change ☒ Addition
2.2 NAME D Kathy Ambachtsheer
2.3 STREET ADDRESS 1701 E. Minnesota Ave.
2.4 CITY-ST-ZIP Deland, FL 32724

TITLE D ☒ DELETE
NAME AXTELL, WILLIAM
STREET ADDRESS 600 N BOUNDARY #110A
CITY-ST-ZIP DELAND FL

3.1 TITLE ☒ Change ☒ Addition
3.2 NAME D Kenneth Bradley
3.3 STREET ADDRESS 799 Torchwood Drive
3.4 CITY-ST-ZIP Deland, FL 32724

TITLE D ☒ DELETE
NAME JONES, PAUL
STREET ADDRESS 527 W WISCONSIN AVE.
CITY-ST-ZIP DELAND FL

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME D Joseph Guthrie
4.3 STREET ADDRESS 3351 Black Willow Trail, P.O.Box 4166
4.4 CITY-ST-ZIP Deland, FL 32723-4166

TITLE D ☐ DELETE
NAME BRADLEY, MARY
STREET ADDRESS 617 N. FLORIDA AVE
CITY-ST-ZIP DELAND FL 32720

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D ☒ DELETE
NAME COCHRAN, RUTHE
STREET ADDRESS 518 N. FLORIDA AVE.
CITY-ST-ZIP DELAND FL 32720

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME D Patricia McCandless
6.3 STREET ADDRESS 241 W. Wisconsin Ave.
6.4 CITY-ST-ZIP Deland, FL 32724

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-11-96 (904) 734-6212

CR2E037 (12/95)