

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000001403

1. Entity Name

FIRST PRESBYTERIAN CHURCH OF DELAND, FLORIDA, IN

FILED
Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90075 029 ****61.25

Principal Place of Business 724 N. WOODLAND BLVD. DELAND FL 32720		Mailing Address 724 N. WOODLAND BLVD. DELAND FL 32720-2707	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0838091	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HEDGEPEETH, BRUCE E 724 N WOODLAND BOULEVARD DELAND FL 32720		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
--	--	--	--

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.

SIGNATURE Bruce E. Hedgepeth *Bruce E. Hedgepeth*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
---	---	------------------------------------	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MONTGOMERY, HENRY	NAME	
STREET ADDRESS	1157 GLENWOOD TRAILS	STREET ADDRESS	
CITY-ST-ZIP	DELAND FL 32720	CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUTCHISON, MILTON	NAME	Guthrie, Joseph
STREET ADDRESS	3408 BLACK WILLOW TRAIL	STREET ADDRESS	3351 Black Willow Trail
CITY-ST-ZIP	DELAND FL	CITY-ST-ZIP	DeLand, FL 32724
TITLE	<input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAUP, LEE	NAME	Jones, Paul C.
STREET ADDRESS	166 BAY COURT	STREET ADDRESS	527 W. Wisconsin Avenue
CITY-ST-ZIP	DELAND FL	CITY-ST-ZIP	DeLand, FL 32720
TITLE	<input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAHNKE, GUST	NAME	Dandridge, Robert
STREET ADDRESS	528 E FRENCH AVENUE	STREET ADDRESS	5A S. Camellia Court
CITY-ST-ZIP	ORANGE CITY FL	CITY-ST-ZIP	Orange City, FL 32763
TITLE	<input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DREGGORS, LEAH	NAME	Hogle, Richard
STREET ADDRESS	528 W UNIVERSITY AVENUE	STREET ADDRESS	416 W. Pennsylvania Ave.
CITY-ST-ZIP	DELAND FL	CITY-ST-ZIP	DeLand, FL 32720
TITLE	<input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DREGGORS, CHYREL	NAME	Threlkeld, Virginia
STREET ADDRESS	806 BAY TREE CIRCLE	STREET ADDRESS	P.O. Box 1301 521 N. Florida Ave.
CITY-ST-ZIP	DELAND FL	CITY-ST-ZIP	DeLand, FL

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Richard Hogle *Richard Hogle* **REQUIRED** *1/5/00*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #