

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001403

FILED  
Feb 23, 2006  
Secretary of State

**Entity Name:** FIRST PRESBYTERIAN CHURCH OF DELAND, FLORIDA, INC.

**Current Principal Place of Business:**

724 N. WOODLAND BLVD.  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

724 N. WOODLAND BLVD.  
DELAND, FL 32720

**New Mailing Address:**

**FEI Number:** 59-0838091

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GUTHRIE, SANDRA  
3351 BLACK WILLOW TRAIL  
DELAND, FL 32724 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: D ( ) Delete  
Name: KINSLEY, NANCY  
Address: 706 N. GARFIELD AVE  
City-St-Zip: DELAND, FL 32724

Title: D ( ) Delete  
Name: ABERNATHY, MARTA  
Address: 1070 W. VILLAGE GREEN RD  
City-St-Zip: DELAND, FL 32720

Title: D ( ) Delete  
Name: NAPIER, KEITH  
Address: 829 LINCOLN ROAD  
City-St-Zip: DELAND, FL 32724

Title: D ( ) Delete  
Name: CAMPBELL, WILLIAM  
Address: 761 DEERFOOT ROAD  
City-St-Zip: DELAND, FL 32720

Title: T ( ) Delete  
Name: HOGLE, RICHARD  
Address: 416 W PENNSYLVANIA AVE  
City-St-Zip: DELAND, FL 32720

Title: D ( ) Delete  
Name: WINTER, JAMES  
Address: 2963 PAOLINI DRIVE  
City-St-Zip: DELAND, FL 32720

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: CRAIG, CHARLES  
Address: 1509 RED PLUM HOLLOW  
City-St-Zip: DELAND, FL 32720

Title: D (X) Change ( ) Addition  
Name: ALLISON, SUSAN  
Address: 1670 TWIN OAKS DR.  
City-St-Zip: DELAND, FL 32720

Title: D (X) Change ( ) Addition  
Name: CASKEY, ANN  
Address: 703 ALBERT LANE  
City-St-Zip: DELAND, FL 32720

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 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: RICHARD HOGLE

T

02/23/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date