2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001403

FILED Apr 15, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 724 N. WOODLAND BLVD. DELAND, FL 32720 **Current Mailing Address: New Mailing Address:** 724 N. WOODLAND BLVD. DELAND, FL 32720 FEI Number: 59-0838091 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DICKINSON, KAREN 820 E. WISCONSIN AVE DELAND, FL 32724 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BAILEY, BONNIE Name: Name: 408 E. RICH AVE. Address: Address: City-St-Zip: DELAND, FL 32724 City-St-Zip: Title: () Delete Title: () Change () Addition LANGELL, DAVID Name: Name: Address: 437 W. HOGLE AVE Address: City-St-Zip: DELAND, FL 32720 City-St-Zip: Title: () Delete Title: (X) Change () Addition CASKEY, ANN Name: FINKLE, ANDREA Name: 729 W. PENNSYLVANIA AVE Address: 703 ALBERT LANE Address: City-St-Zip: DELAND, FL 32720 City-St-Zip: DELAND, FL 32720 () Delete Title: Title: (X) Change () Addition Name: LISKA, FRANK Name: BRADLEY, KEN 1520 E. SILVER HAMMOCK 799 TORCHWOOD DR Address: Address: City-St-Zip: DELAND, FL 32724 City-St-Zip: DELAND, FL 32724 Title: () Delete Title: (X) Change () Addition HOGLE, RICHARD GALLOWAY, JAMES Name: Name: 416 W PENNSYLVANIA AVE 428 HIGHTOWER DR Address: Address: City-St-Zip: DELAND, FL 32720 City-St-Zip: DEBARY, FL 32713 Title: () Delete Title: (X) Change () Addition KINSLEY, KIM LEE, THOMAS Name: Name: Address: 706 N. GARFIELD AVE Address: 2321 DARTMOUTH RD DELAND, FL 32724 City-St-Zip: DELAND, FL 32724 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: THOMAS LEE MGR 04/15/2009