2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002125

FILED Feb 10, 2009 Secretary of State

Entity Name: THE FIRST PRESBYTERIAN CHURCH OF DEFUNIAK SPRINGS, FLORIDA, INC.

Current Principal Place of Business:				New Princ	New Principal Place of Business:		
1063 CIRC DEFUNIAK	LE DR (SPRINGS, FL	32435	US				
Current Mailing Address:				New Maili	New Mailing Address:		
1063 CIRC DEFUNIAK	LE DR (SPRINGS, FL	32435	US				
FEI Number:	59-2526160	FEI Numb	er Applied For () F	El Number Not Appl	clicable () Certificate of Status Desired ()		
Name and	Address of Cu	ırrent Re	gistered Agent:	Name and	Address of New Registered Agent:		
534 CIRCL DEFUNIAK	(SPRINGS, FL	32435	US				
	named entity sue of Florida.	ubmits this	s statement for the purp	ose of changing it	its registered office or registered agent, or both,		
SIGNATUF	RE:						
	Electronic	: Signatur	e of Registered Agent		Date		
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	0 ()[MOONEY, BECK 62 BAY AVENUE DEFUNIAK SPRI		435	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	O () [MCDONALD, DO 4145 CO. HWY 2 DEFUNIAK SPRI	280 E	:435 US	Title: Name: Address: City-St-Zip:	O (X) Change () Addition ANDREWS, ANGUS MR. 110 MICHIGAN ST DEFUNIAK SPRINGS, FL 32435 US		
Title: Name: Address: City-St-Zip:	0 ()[WORK, MAC MF 111 BAY AVE DEFUNIAK SPRI		:435 US	Title: Name: Address: City-St-Zip:	0 (X) Change () Addition SOUTHARD III, BENTON MR. 534 CIRCLE DRIVE DEFUNIAK SPRINGS, FL 32435 US		
Title: Name: Address: City-St-Zip:	KELLY, JOYCE 1257 S. 2ND STR		:435	Title: Name: Address: City-St-Zip:	O (X) Change () Addition KELLY, JOYCE MS. 1257 S. 2ND STREET DEFUNIAK SPRINGS, FL 32435		
Title: Name: Address: City-St-Zip:	O () E SOUTHARD, BEN 534 CIRCLE DRI DEFUNIAK SPRI	VE; PO BO	X 564	Title: Name: Address: City-St-Zip:	O (X) Change () Addition DILLON, PAM MRS 568 PHIL HARRIS DRIVE DEFUNIAK SPRINGS, FL 32433		
Title: Name: Address: City-St-Zip:	O ()[COSSON, CHAR 274 CHESS SPE DEFUNIAK SPRI	NCE RD.	435	Title: Name: Address: City-St-Zip:	()Change ()Addition		

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: BENTON M. SOUTHARD III MR. 02/10/2009