

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005611

FILED  
Jan 04, 2010  
Secretary of State

**Entity Name:** FAITH PRESBYTERIAN CHURCH ARP, INC.

**Current Principal Place of Business:**

3984 CR 214  
OXFORD, FL 34484 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 98  
OXFORD, FL 34484 US

**New Mailing Address:**

**FEI Number:** 59-3212401

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VAN RIDER, JEFFREY  
6649 CR 151  
WILDWOOD, FL 34785 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: PD  
Name: VAN RIDER, JEFFREY E  
Address: 6649 CR 15  
City-St-Zip: WILDWOOD, FL 34785

Title: VPSD  
Name: CAIRNS, ANDREW J  
Address: 365 BOB WHITE RD  
City-St-Zip: WILDWOOD, FL 34785

Title: D  
Name: WILLIAMS, ROBERT  
Address: 2775 CR 200  
City-St-Zip: OXFORD, FL 34484

Title: D  
Name: BECKETT, PAUL  
Address: 540 ST. ANDREWS BLVD  
City-St-Zip: THE VILLAGES, FL 32159

Title: T  
Name: ANDERSON, ROBERT  
Address: 2904 MANOR DOWNS  
City-St-Zip: THE VILLAGES, FL 32162

Title: SEC  
Name: HARDEMAN, REBECCA  
Address: 5011 SE 108TH PLACE  
City-St-Zip: BELLEVIEW, FL 34420

I hereby 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 all other like empowered.

SIGNATURE: JEFFREY E. VAN RIDER

PD

01/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date