

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005459

FILED  
Feb 16, 2009  
Secretary of State

**Entity Name:** BRANFORD PRESBYTERIAN CHURCH OF BRANFORD, FLORIDA, INC.

**Current Principal Place of Business:**

CORNER OF HAINES AND DRANE STREET  
BRANFORD, FL 32008

**New Principal Place of Business:**

**Current Mailing Address:**

C/O KRISTINE ECKIS, CLERK  
P.O. BOX 546  
BRANFORD, FL 32008

**New Mailing Address:**

**FEI Number:** 59-3012926

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOWELL, DENNIS  
227 SE CA HOWELL DRIVE  
BRANFORD, FL 32008 US

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

DOUGLASS, LEONARD  
6299 NW 50 TERRACE  
BELL, FL 32619 US

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: LEONARD DOUGLASS

02/16/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HOWELL, DENNIS  
Address: 227 SE CA HOWELL DRIVE  
City-St-Zip: BRANFORD, FL 32008

Title: V ( ) Delete  
Name: DOUGLASS, LEONARD  
Address: 6299 NW 50TH TERRACE  
City-St-Zip: BELL, FL 32619

Title: T ( ) Delete  
Name: SUMMERLIN, KAY CHRISTINE  
Address: 7333 240TH STREET  
City-St-Zip: O'BRIEN, FL 32071

Title: S ( ) Delete  
Name: ECKIS, KRISTINE  
Address: 385 NE GOLD DUST ROAD  
City-St-Zip: BRANFORD, FL 32008

Title: D ( ) Delete  
Name: KELLEY, JANET  
Address: 222 SE CA HOWELL DRIVE  
City-St-Zip: BRANFORD, FL 32008

Title: D ( ) Delete  
Name: MEADE, KATHY  
Address: 4357 284TH TERRACE  
City-St-Zip: BRANFORD, FL 32008

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

Title: P (X) Change ( ) Addition  
Name: DOUGLASS, LEONARD  
Address: 6299 NW 50 TERRACE  
City-St-Zip: BELL, FL 32619

Title: V (X) Change ( ) Addition  
Name: EVANS, LINDA  
Address: PO BOX 1653  
City-St-Zip: BRANFORD, FL 32008

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: MEADE, ED  
Address: 4357 284TH TERRACE  
City-St-Zip: BRANFORD, FL 32008

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: KRISTINE ECKIS

S

02/16/2009

Electronic Signature of Signing Officer or Director

Date