

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005590

FILED  
Mar 21, 2005  
Secretary of State

**Entity Name:** THE FIRST PRESBYTERIAN CHURCH OF FORT MEADE, FLORIDA, INC.

**Current Principal Place of Business:**

118 NORTH PINE AVE.  
FT. MEADE, FL 33841

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 176  
FT. MEADE, FL 33841 US

**New Mailing Address:**

**FEI Number:** 59-3364316      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

FORT, CHARLES R  
415 WILLOW OAK COURT  
FT MEADE, FL 33841 US

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

FORT, CHARLES R  
415 WILLOW OAK COURT  
FT MEADE, FL 33841 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: CHARLES R. FORT

03/21/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DT ( ) Delete  
Name: BATES, JAYNE V  
Address: P.O. BOX 952 N/A  
City-St-Zip: FT. MEADE, FL 33841

Title: D ( ) Delete  
Name: MCKENZIE, COVEDA M  
Address: 1100 MT. PISGAH ROAD  
City-St-Zip: FT. MEADE, FL 33841

Title: DS ( ) Delete  
Name: FORT, CHARLES R  
Address: 415 WILLOW OAK CT.  
City-St-Zip: FT. MEADE, FL

Title: DP ( ) Delete  
Name: STHRESHLEY, LAWRENCE F III  
Address: 311 NE 1ST STREET  
City-St-Zip: FORT MYERS, FL 33041

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

Title: D (X) Change ( ) Addition  
Name: BATES, JAYNE V  
Address: P.O. BOX 952 N/A  
City-St-Zip: FT. MEADE, FL 33841

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

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

Title: DPT (X) Change ( ) Addition  
Name: STHRESHLEY, III, LAWRENCE F  
Address: 311 NE 1ST STREET  
City-St-Zip: FORT MYERS, FL 33041

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LAWRENCE F. STHRESHLEY, III

DPT

03/21/2005

Electronic Signature of Signing Officer or Director

Date