

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005590

**FILED**  
**Jan 15, 2010**  
**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 ( )**

**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:**

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: D  
Name: BATES, JAYNE V  
Address: P.O. BOX 952  
City-St-Zip: FT. MEADE, FL 33841

Title: D  
Name: FORT, ROBERT A  
Address: 802 NORTH LANIER AVE  
City-St-Zip: FT. MEADE, FL 33841

Title: DPT  
Name: FORT, CHARLES R  
Address: 415 WILLOW OAK COURT  
City-St-Zip: FT. MEADE, FL 33841

Title: DS  
Name: KITCHINGS, NANCY  
Address: 512 WATER OAK COURT  
City-St-Zip: FORT MEADE, FL 33841

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: CHARLES R FORT

DPT

01/15/2010

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

\_\_\_\_\_  
Date