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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N96000003533

1. Corporation Name

FIRST PRESBYTERIAN CHURCH OF BARTOW, FLORIDA, IN C.

Principal Place of Business

355 SOUTH FLORIDA AVE.
 BARTOW FL 33830

Mailing Address

355 SOUTH FLORIDA AVE.
 BARTOW FL 33830



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

07/03/1996

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-0998544

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HATCH, JAMES B III
 1010 MARIPOSA
 BARTOW FL 33830

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D DELETE
 NAME EWING, CAROLYN
 STREET ADDRESS 3047 SHOAL CREEK VILLAGE DR.
 CITY-ST-ZIP LAKELAND FL 33803

1.1 TITLE D Change Addition
 1.2 NAME Buddy Harper
 1.3 STREET ADDRESS 595 W. Main St.
 1.4 CITY-ST-ZIP Bartow, FL 33830

TITLE D DELETE
 NAME MUNROE, LINDA S
 STREET ADDRESS 1185 LISA LANE
 CITY-ST-ZIP BARTOW FL 33830

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE D DELETE
 NAME SMITH, GINGER
 STREET ADDRESS 1190 S. ORANGE AVE
 CITY-ST-ZIP BARTOW FL 33830

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE D DELETE
 NAME WALLACE, HOWE
 STREET ADDRESS 1180 E. GEORGE ST.
 CITY-ST-ZIP BARTOW FL 33830

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE SD DELETE
 NAME WALTERS, DOROTHY R
 STREET ADDRESS 950 SOLEDAD
 CITY-ST-ZIP BARTOW FL 33830

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE D Change Addition
 6.2 NAME William L. Harris
 6.3 STREET ADDRESS 565 W. Pearl St.
 6.4 CITY-ST-ZIP Bartow, FL 33830

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William L. Harris
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/30/99

(941) 533-5005

Date

Daytime Phone #

CR2E037 (1/98)