

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 03, 2009
Secretary of State

DOCUMENT# N97000002593

Entity Name: TREASURE COAST PRESBYTERIAN CHURCH, INC.**Current Principal Place of Business:**217 AKRON AVE
STUART, FL 34994**New Principal Place of Business:****Current Mailing Address:**217 AKRON AVE
STUART, FL 34994**New Mailing Address:****FEI Number:** 65-0675867**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NEFF, FRANK
3705 NW DEER OAK DR
JENSEN BEACH, FL 34957 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 () Delete
Name: NEFF, FRANK
Address: 3705 NW DEER OAK DR
City-St-Zip: JENSEN BEACH, FL 34957**Title:** D () Delete
Name: BOURRET, SCOTT
Address: 929 WHISPER RIDGE
City-St-Zip: PALM CITY, FL 34990**Title:** D () Delete
Name: TYO, RANDY
Address: 2874 NE SEWALLS LANDING WAY
City-St-Zip: JENSEN BEACH, FL 34997**Title:** T () Delete
Name: CHISM, JASON
Address: 2061 SE GIFFEN AVENUE
City-St-Zip: PORT ST LUCIE, FL 34952**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****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:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D () Change (X) Addition
Name: BARTUSKA, PETER
Address: 2384 SW ISLAND CREEK TR
City-St-Zip: PALM CITY, FL 34990

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: FRANK NEFF

PD

06/03/2009

Electronic Signature of Signing Officer or Director

Date