

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 29, 2009  
Secretary of State**

DOCUMENT# N99000005503

Entity Name: FIRST PRESBYTERIAN CHURCH OF STARKE, FLORIDA, INC.

**Current Principal Place of Business:**

921 EAST CALL STREET  
STARKE, FL 32091

**New Principal Place of Business:**

**Current Mailing Address:**

921 EAST CALL STREET  
STARKE, FL 32091

**New Mailing Address:**

FEI Number: 59-2061315      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WELLS, ORIAN  
1310 EAST CALL STREET  
STARKE, FL 32091      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: T            ( ) Delete
- Name: MOULDER, RALPH
- Address: 4333 SEMINOLE ST
- City-St-Zip: STARKE, FL 32091
  
- Title: T            ( ) Delete
- Name: WELLS, ORIAN
- Address: 1310 EAST CALL STREET
- City-St-Zip: STARKE, FL 32091
  
- Title: T            ( ) Delete
- Name: WINDGASSEN, JOYCE
- Address: PO BOX D
- City-St-Zip: LAKE GENEVA, FL 32160
  
- Title: T            ( ) Delete
- Name: STEVENS, JAMES
- Address: PO BOX 19
- City-St-Zip: LAKE BUTLER, FL 32054
  
- Title: T            ( ) Delete
- Name: MCRAE, ARLEY
- Address: 1517 BESSENT RD
- City-St-Zip: STARKE, FL 32091
  
- Title: T            ( ) Delete
- Name: MOISE, MILTON
- Address: 6115 KINGSLEY LAKE DR.
- City-St-Zip: STARKE, FL 32091

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

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: ORIAN WELLS

T

01/29/2009

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

\_\_\_\_\_  
Date