

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711808

FILED  
Jan 19, 2011  
Secretary of State

**Entity Name:** PRESBYTERIAN CHURCH OF SEFFNER, INC.

**Current Principal Place of Business:**

1906 SOUTH LENNA AVENUE  
SEFFNER, FL 33584 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 545  
SEFFNER, FL 33583 US

**New Mailing Address:**

FEI Number: 59-2234666

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMITH, RONALD E  
10552 TAYLOR ROAD  
THONOTOSASSA, FL 33592 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  
Name: MASON, JEFF  
Address: 1207 LADY ELAINE DR..  
City-St-Zip: VALRICO, FL 33594 US

Title: D  
Name: DOYLE, WAYNE  
Address: 502 RUNNING HORSE RD.  
City-St-Zip: SEFFNER, FL 33584 US

Title: D  
Name: WHEELER, ANNE  
Address: 1204 JOE HENRY WHEELER RD.  
City-St-Zip: DOVER, FL 33527 US

Title: SD  
Name: MCCOY, JOHANNA  
Address: 2414 KINGSWAY RD  
City-St-Zip: SEFFNER, FL 33584 US

Title: VP  
Name: WILLIAMS, CAMMIE  
Address: 206 NEW HOPE RD..  
City-St-Zip: BRANDON, FL 33510 US

Title: TD  
Name: SMITH, RONALD E  
Address: 10552 TAYLOR ROAD  
City-St-Zip: THONOTOSASSA, FL 33592 US

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: RONALD E. SMITH

TD

01/19/2011

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

\_\_\_\_\_  
Date