

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 704870

**Entity Name:** THE FIRST PRESBYTERIAN CHURCH OF BOCA RATON, FLORIDA, INC.

**FILED**  
**Jan 22, 2014**  
**Secretary of State**  
**CC1751530851**

**Current Principal Place of Business:**

600 W CAMINO REAL  
BOCA RATON, FL 33486

**Current Mailing Address:**

600 W CAMINO REAL  
BOCA RATON, FL 33486

**FEI Number: 59-0895905**

**Certificate of Status Desired: No**

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

STOUT, JEAN  
600 W CAMINO REAL  
BOCA RATON, FL 33486 US

*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

**Officer/Director Detail :**

Title P  
Name DAMRON, J. RICHARD JR.  
Address 600 W CAMINO REAL  
City-State-Zip: BOCA RATON FL 33486

Title T  
Name SCHATZ, ED  
Address 600 WEST CAMINO REAL  
City-State-Zip: BOCA RATON FL 33486

Title D  
Name MILLER, DOUG  
Address 600 W CAMINO REAL  
City-State-Zip: BOCA RATON FL 33486

Title D  
Name TREFTS, STACEY  
Address 600 W CAMINO REAL  
City-State-Zip: BOCA RATON FL 33486

Title D  
Name SANTIAGO, REBECCA  
Address 600 W CAMINO REAL  
City-State-Zip: BOCA RATON FL 33486

Title VP  
Name PEARSON, VIC  
Address 600 W. CAMINO REAL  
City-State-Zip: BOCA RATON FL 33486

Title S  
Name STOUT, JEAN  
Address 600 W CAMINO REAL  
City-State-Zip: BOCA RATON FL 33486

*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: JEAN STOUT**

**SECRETARY**

**01/22/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date