

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 768076

**FILED  
Mar 19, 2019  
Secretary of State  
9721625689CC**

**Entity Name:** FIRST PRESBYTERIAN CHURCH OF CRESCENT CITY, INC.

**Current Principal Place of Business:**

301 E CYPRESS AVE  
CRESCENT CITY, FL 32112

**Current Mailing Address:**

301 E CYPRESS AVE  
CRESCENT CITY, FL 32112 US

**FEI Number:** 59-1225205

**Certificate of Status Desired:** No

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

SMITH, MARY CAROLYN CLERK OF SESSION  
300 LAKEVIEW AVENUE  
CRESCENT CITY, FL 32112 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:** MARY CAROLYN SMITH

03/19/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD	Title	CLERK OF SESSION
Name	STAIR, JIM	Name	SMITH, CAROLYN
Address	17 LAKESHORE DRIVE	Address	300 LAKEVIEW AVE
City-State-Zip:	PIERSON FL 32180	City-State-Zip:	CRESCENT CITY FL 32112
Title	D	Title	VCD
Name	GOOLSBY, JIM	Name	STEVENS, MARY
Address	1717 COUNTY ROAD 308	Address	494 CLIFTON ROAD
City-State-Zip:	CRESCENT CITY FL 32112	City-State-Zip:	CRESCENT CITY FL 32112
Title	TREASURER		
Name	SAULS, PATRICIA TREASURER		
Address	118CESSNA STREET, BOX 27		
City-State-Zip:	LAKE COMO FL 32157		

*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:** PATRICIA SAULS

**TREASURER**

03/19/2019

Electronic Signature of Signing Officer/Director Detail

Date