

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000005112

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

**FILED**  
**Jan 27, 2024**  
**Secretary of State**  
**8898940816CC**

**Current Principal Place of Business:**

100 E. 7TH STREET  
P.O. BOX 1787  
PANAMA CITY, FL 32402

**Current Mailing Address:**

P.O. BOX 1878  
PANAMA CITY, FL 32402 US

**FEI Number: 59-0696297**

**Certificate of Status Desired: Yes**

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

GROOM, JENNIFER  
100 E. 7TH STREET  
P.O. BOX 1878  
PANAMA CITY, FL 32402 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: JENNIFER GROOM**

**01/27/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           MANAGER  
Name           GROOM, JENNIFER SHEA  
Address        P.O. BOX 1878  
City-State-Zip: PANAMA CITY FL 32402

Title           TRUSTEE  
Name           DAUGHDRILL, BILL  
Address        210 SOUTH MACARTHUR AVENUE  
City-State-Zip: PANAMA CITY FL 32401

Title           TREASURER  
Name           FINDLAY, JOHN  
Address        P.O. BOX 27644  
City-State-Zip: PANAMA CITY FL 32411

Title           TRUSTEE  
Name           GEORGIADIS, ANDY  
Address        176 MANISTEE DRIVE  
City-State-Zip: PANAMA CITY BEACH FL 32413

Title           TRUSTEE  
Name           HARRELL, JOHN  
Address        4012 RIVERSIDE DRIVE  
City-State-Zip: PANAMA CITY FL 32404

Title           TRUSTEE  
Name           HAYES, JONATHAN  
Address        815 BUENA VISTA BOULEVARD  
City-State-Zip: PANAMA CITY FL 32401

Title           TRUSTEE  
Name           SKERRATT, FRANK  
Address        3238 W HWY 390  
City-State-Zip: PANAMA CITY FL 32405

Title           TRUSTEE  
Name           TEPLICEK, MATT  
Address        3526 ROSEWOOD CIRCLE  
City-State-Zip: LYNN HAVEN FL 32444

**Continues on page 2**

*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: GROOM, JENNIFER SHEA**

**MANAGER**

**01/27/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title TRUSTEE  
Name TRUMBULL, JAY  
Address 500 BUNKERS COVE ROAD  
City-State-Zip: PANAMA CITY FL 32401

Title TRUSTEE  
Name WHITE, LARRY  
Address 14311 ALLANTON ROAD  
City-State-Zip: PANAMA CITY FL 32404