

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N43940

**Entity Name:** FIRST PRESBYTERIAN CHURCH OF CRESTVIEW, INC.

**Current Principal Place of Business:**

492 NORTH FERDON BLVD  
CRESTVIEW, FL 32536

**Current Mailing Address:**

492 NORTH FERDON BLVD  
CRESTVIEW, FL 32536

**FEI Number:** 59-1711838

**Certificate of Status Desired:** No

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

KITCHEN, EDWARD  
201 POWELL DRIVE  
CRESTVIEW, FL 32536 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           PRESIDENT  
Name           THALACKER, RICHARD  
Address        6047 BLUEBERRY LANE  
City-State-Zip: CRESTVIEW FL 32536

Title           SECRETARY  
Name           CRAWFORD, TIMOTHY  
Address        1 CONNIE DR  
City-State-Zip: SHALIMAR FL 32579

Title           TREASURER  
Name           THALACKER, PATRICIA  
Address        6047 BLUEBERRY LANE  
City-State-Zip: CRESTVIEW FL 32536

Title           MEMBER  
Name           SANTIAGO, RUTH  
Address        120 NICOLE LANE  
City-State-Zip: CRESTVIEW FL 32539

Title           MEMBER  
Name           CLACK, JEFF  
Address        8 HOLLY ROAD  
City-State-Zip: CRESTSVIEW FL 32539

*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:** TIMOTHY CRAWFORD

**SECRETARY**

**06/18/2013**

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

\_\_\_\_\_  
Date