

**2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000002297

**Entity Name:** EVANGELICAL PRESBYTERIAN CHURCH, INC.

**Current Principal Place of Business:**

5850 T.G. LEE BOULEVARD STE 510  
ORLANDO, FL 32822

**Current Mailing Address:**

5850 T.G. LEE BOULEVARD STE 510  
ORLANDO, FL 32822 US

**FEI Number:** 38-2329622

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 WEAVER, DEAN  
Address 5850 T.G. LEE BOULEVARD STE 510  
City-State-Zip: ORLANDO FL 32822

Title VP  
Name DAVIS, MICHAEL  
Address 5850 T.G. LEE BOULEVARD STE 510  
City-State-Zip: ORLANDO FL 32822

Title OTHER  
Name GIBSON, MIKE  
Address PO BOX 1491  
City-State-Zip: MUNFORD TN 38058

Title OTHER  
Name THORP, CASE  
Address 2001 WEBER STREET  
City-State-Zip: ORLANDO FL 32803

Title D  
Name WERNER, TOM  
Address 409 FAIRWAY LANE  
City-State-Zip: KIRKWOOD MO 63122

Title CFO  
Name COELHO, PATRICK  
Address 5850 T.G. LEE BOULEVARD STE 510  
City-State-Zip: ORLANDO FL 32822

Title OTHER  
Name MEYERS, GLENN  
Address 3380 NEHRIG HILL RD  
City-State-Zip: ARDARA PA 15615

*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:** PATRICK COELHO

**CFO**

**02/07/2023**

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

\_\_\_\_\_  
Date