


2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2003 8:00 am
Secretary of State

01-17-2003 90092 020 ****61.25

DOCUMENT # N01463

1. Entity Name
FIRST PRESBYTERIAN CHURCH OF OAKLAND, FLORIDA



Principal Place of Business Mailing Address

**218 E OAKLAND AVENUE
OAKLAND FL 34760** **800 S. DILLARD ST.
P. O. BOX 514
WINTER GARDEN FL 34787-3910**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**DEREK J. BLAKESLEE
800 S. DILLARD ST.
~~P.O. BOX 770514~~
WINTER GARDEN FL 34777**

4. FEI Number **59-0806974** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code **34797**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	STANFORD, DAVID J	
STREET ADDRESS	190 TEMPLE GROVE DR	
CITY-ST-ZIP	WINTER GARDEN FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BLAKESLEE, DEREK	
STREET ADDRESS	800 S. DILLARD ST.	
CITY-ST-ZIP	WINTER GARDEN FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	DAVIS, MARTIN	
STREET ADDRESS	17517 DEER ISLAND CIRCLE	
CITY-ST-ZIP	KILLARNEY FL 34740	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Derek J. Blakeslee 1/17/03 407-656-6611

CR2E037 (10/02)