2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#713363

FILED Jun 04, 2007 Secretary of State

Entity Name: MIAKKA METHODIST CHURCH, INC.

Current F	Principal Place of Business:	New Principal Place of Business:
	AKKA RD. TA, FL 34240	
Current l	Mailing Address:	New Mailing Address:
	AKKA RD. TA, FL 34240	
n accorda	r: 59-2479004 FEI Number Applied For (nce with s. 607.193(2)(b), F.S., the corporation of d Address of Current Registered Agen	did not receive the prior notice.
551 MYAŁ SARASO The abov	TA, FL 34240 US	the purpose of changing its registered office or registered agent, or both,
n the Sta	te oi Fiorida.	
DIONIATI	וחר.	
SIGNATL	RE: Electronic Signature of Registered	d Agent Date
SIGNATU OFFICER		d Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
	Electronic Signature of Registered RS AND DIRECTORS: T () Delete LANDER, BOBBIE 1146 LENA LANE	
DFFICER Title: Name: Nddress: City-St-Zip: Title: Name: Nddress:	Electronic Signature of Registered RS AND DIRECTORS: T () Delete LANDER, BOBBIE 1146 LENA LANE SARASOTA, FL 34240 D () Delete FREIDA, KATSAROS 15162 FRUITVILLE RD.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address:
OFFICER Fitle: Name: Address:	Electronic Signature of Registered RS AND DIRECTORS: T () Delete LANDER, BOBBIE 1146 LENA LANE SARASOTA, FL 34240 D () Delete FREIDA, KATSAROS 15162 FRUITVILLE RD. SARASOTA, FL 34240 D () Delete ADAMS, RICHARD 31950 SINGLETARY ROAD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
OFFICER Title: Name: Address: City-St-Zip: Name: Address: City-St-Zip: Title: Name: Name: Address:	Electronic Signature of Registered RS AND DIRECTORS: T () Delete LANDER, BOBBIE 1146 LENA LANE SARASOTA, FL 34240 D () Delete FREIDA, KATSAROS 15162 FRUITVILLE RD. SARASOTA, FL 34240 D () Delete ADAMS, RICHARD 31950 SINGLETARY ROAD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BOBBIE LANDER T 06/04/2007