

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 04, 2004
Secretary of State**

DOCUMENT# 735596

Entity Name: MIMS UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

3302 GREEN ST.
MIMS, FL 32754

New Principal Place of Business:

Current Mailing Address:

3302 GREEN ST.
MIMS, FL 32754

New Mailing Address:

FEI Number: 59-2354758 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOUCHTON, BILL
3475 TRACY CT
MIMS, FL 32754

Name and Address of New Registered Agent:

KERSHNER, NINA
4144 WEST MAIN STREET
MIMS, FL 32754

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: NINA KERSHNER 02/04/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JOYNER, ORBRIE
Address: 5170 INTERNATIONAL AVE
City-St-Zip: MIMS, FL

Title: D () Delete
Name: KERSHNER, NINA
Address: 4144 W MAIN ST
City-St-Zip: MIMS, FL 32754

Title: D () Delete
Name: KYZER, JERRY
Address: 2355 BROADWAY
City-St-Zip: MIMS, FL 32754

Title: D () Delete
Name: TOUCHTON, BILL
Address: 3475 TRACY CT
City-St-Zip: MIMS, FL 32754

Title: D () Delete
Name: HARRIS, EDSON
Address: 3504 W. MAIN ST
City-St-Zip: MIMS, FL 32754

Title: D () Delete
Name: CORN, GRAYDON
Address: 3690 AURANTIA RD
City-St-Zip: MIMS, FL 32754

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ROB, DAVIS
Address: 2562 PINE AVENUE
City-St-Zip: MIMS, FL 32754

Title: D (X) Change () Addition
Name: RENNINGER, DON
Address: 4015 GRANT LINE ROAD
City-St-Zip: MIMS, FL 32754

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NINA KERSHNER D 02/04/2004
Electronic Signature of Signing Officer or Director Date