

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2002 8:00 am
Secretary of State

0077563

DOCUMENT # N00750

1. Entity Name

KEYSTONE UNITED METHODIST CHURCH OF ODESSA, INC.

02-28-2002 90066 040 ****61.25

Principal Place of Business 16301 RACE TRACK RD. ODESSA FL 33556	Mailing Address 16301 RACE TRACK RD. ODESSA FL 33556
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 59-0971424	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
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Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STEINMEYER, MAC R
6502 GRAZING LANE
ODESSA FL 33556**

Name RITA BARNETT
Street Address (P.O. Box Number is Not Acceptable) 19509 ANGEL Lane
City Odessa FL Zip Code 33556

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.

SIGNATURE *Rita Barnett* DATE 2-4-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PD	CARNEY, JOHN	10507 CASTLEFORD WAY	TAMPA FL 33626	<input type="checkbox"/>	<input type="checkbox"/>
VD	JAMES, KIRK	18119 JORENE CIRCLE	ODESSA FL 33556	<input checked="" type="checkbox"/>	<input type="checkbox"/>
STD	GARCIA, YVONNE	7013 JONES ROAD	ODESSA FL 33556	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VD	JACKSON, DAVID	4202 GLEN HAVEN LN	TAMPA FL 33624	<input type="checkbox"/>	<input type="checkbox"/>
STD	BARNETT, RITA	19509 ANGEL LN	ODESSA FL 33556	<input type="checkbox"/>	<input type="checkbox"/>
P/D	SAME			<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	Diebert, Jack	17340 Dunlock Rd.	Lutz, Fl 33549	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Polley, John	12818 Royal George Ave	Odessa, Fl 33556	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V/D	SAME			<input checked="" type="checkbox"/>	<input type="checkbox"/>
SIT/D	SAME			<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	Owen Sarah	3916 Yellow Finch Lane	Lutz, Fl 33549	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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: *Rita Barnett* DATE 2-12-02 DAYTIME PHONE # 770-329-9750
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/01)