

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00750

FILED
Apr 20, 2009
Secretary of State

Entity Name: KEYSTONE UNITED METHODIST CHURCH OF ODESSA, INC.

Current Principal Place of Business:

16301 RACE TRACK RD.
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

16301 RACE TRACK RD.
ODESSA, FL 33556

New Mailing Address:

FEI Number: 59-0971424 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOWRY, JANE
3807 ESPLANADE CT
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

BROWN, KAYE
15126 SHAW RD.
TAMPA, FL 33625 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: KAYE BROWN

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: VAN AMBRUGH, MICHAEL
Address: 108 SHOREVIEW LANE
City-St-Zip: OLDSMAR, FL 34685

Title: D () Delete
Name: DEEP, GINNY
Address: 14638 CORAL BERRY DR
City-St-Zip: ODESSA, FL 33556

Title: D () Delete
Name: HART, BOB
Address: 16921 CRAWLEY RD
City-St-Zip: ODESSA, FL 33556

Title: D () Delete
Name: WARD, ROBERT
Address: 1115 AVERY OAKS
City-St-Zip: TAMPA, FL 33625

Title: STD () Delete
Name: LOWRY, JANE
Address: 3807 ESPLANADE CT
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: HART, ROBERT
Address: 16921 CRAWLEY RD.
City-St-Zip: ODESSA, FL 33556

Title: D (X) Change () Addition
Name: KINGERY, KEN
Address: 3407 ROSEVILLE CT.
City-St-Zip: TAMPA, FL 33624

Title: D (X) Change () Addition
Name: BATTLE, RICK
Address: 19510 WYNDMILL CR.
City-St-Zip: ODESSA, FL 33556

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

Title: STD (X) Change () Addition
Name: BROWN, KAYE
Address: 15126 SHAW RD.
City-St-Zip: TAMPA, FL 33625

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: KAYE BROWN

STD

04/20/2009

Electronic Signature of Signing Officer or Director

Date