

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03874

FILED
Mar 12, 2009
Secretary of State

Entity Name: THE UNITARIAN UNIVERSALIST FELLOWSHIP OF MARION COUNTY, FLORIDA, INC.

Current Principal Place of Business:

PO BOX 829
SUMMERFIELD, FL 34492

New Principal Place of Business:

7280 SE 135TH STREET
SUMMERFIELD, FL 34491

Current Mailing Address:

PO BOX 829
SUMMERFIELD, FL 34492

New Mailing Address:

FEI Number: 59-2319450 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCINTOSH, JAMES E
17118 SE 78TH LARCHMONT COURT
THE VILLAGES, FL 32162 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BAREFIELD, ANN
Address: 1529 HARTVILLE TRAIL
City-St-Zip: THE VILLAGES, FL 32162

Title: VP () Delete
Name: THOMAS, LINDA
Address: 1662 OSPREY AVE
City-St-Zip: THE VILLAGES, FL 32162

Title: M () Delete
Name: GORE, ALLIE
Address: 8062 SW 81ST LOOP
City-St-Zip: OCALA, FL 34476

Title: M () Delete
Name: GRIFFITH, WENDY
Address: 12524 SW 112ST RD
City-St-Zip: DUNNELLON, FL 34432

Title: D () Delete
Name: HORD, ED
Address: 8442 SW 84TH LOOP
City-St-Zip: OCALA, FL 34481

Title: D () Delete
Name: ZANNELLI, ROBERT
Address: 356 EMERALD RD
City-St-Zip: OCALA, FL 34472

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BAREFIELD, ANN
Address: 1529 HARTVILLE TRAIL
City-St-Zip: THE VILLAGES, FL 32162

Title: MRS (X) Change () Addition
Name: COBURN, ANDREA
Address: 512 DOWNERS GROVE
City-St-Zip: THE VILLAGES, FL 32162

Title: MRS (X) Change () Addition
Name: GORE, ALLIE
Address: 8062 SW 81ST LOOP
City-St-Zip: OCALA, FL 34476

Title: MRS. (X) Change () Addition
Name: GRIFFITH, WENDY
Address: 12524 SW 112ST RD
City-St-Zip: DUNNELLON, FL 34432

Title: MRS. (X) Change () Addition
Name: MCCABE, JACKY
Address: 17771 SE 125TH CIRCLE
City-St-Zip: SUMMRFIELD, FL 34491

Title: MR. (X) Change () Addition
Name: ZANNELLI, ROBERT
Address: 356 EMERALD RD
City-St-Zip: OCALA, FL 34472

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: JAMES E MCINTOSH

Electronic Signature of Signing Officer or Director

MR.

03/12/2009

_____ Date