

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15372

FILED  
Jan 31, 2012  
Secretary of State

**Entity Name:** FIRST UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

1126 E. SILVER SPRINGS  
ATTN: JOAN CASTELLUCCI  
OCALA, FL 34470

**New Principal Place of Business:**

**Current Mailing Address:**

40 SE 11TH AVE  
OCALA, FL 34471

**New Mailing Address:**

FEI Number: 59-0700564

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROBERTS, CAROLYN  
40 SE 11TH AVENUE  
OCALA, FL 34471 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: T  
Name: THOMAS, JOHN ADDITIO  
Address: 2544SE 28 LANE  
City-St-Zip: Ocala, FL 34471

Title: T  
Name: BLEDSOE, BETSY ADDITIO  
Address: 2801 SE 14TH STREET  
City-St-Zip: Ocala, FL 34471

Title: T  
Name: LOSSING, STEVE ADDITIO  
Address: 1414 SE 8 AVENUE  
City-St-Zip: Ocala, FL 34471

Title: T  
Name: GUDE, TIM ADDITIO  
Address: 2330 SE 34TH STREET  
City-St-Zip: Ocala, FL 34471

Title: T  
Name: EDISON, EDWARD ADDITIO  
Address: 5183 SW 33RD STREET  
City-St-Zip: Ocala, FL 34471

Title: T  
Name: NATION, BECKY ADDITIO  
Address: 2021 SE TWIN BRIDGE CIRCLE  
City-St-Zip: Ocala, FL 34471

I hereby 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 all other like empowered.

SIGNATURE: CAROLYN ROBERTS

R.A.

01/31/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date