


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90084 002 ****61.25

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DOCUMENT # N19693					
1. Entity Name FAITH UNITED METHODIST CHURCH OF BRADENTON, INC.					
Principal Place of Business 7215 1ST AVENUE WEST BRADENTON, FL 34209-2211		Mailing Address 7215 1ST AVENUE WEST BRADENTON, FL 34209-2211			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01232007 Chg-NP CR2E037 (12/06)	
City & State		City & State		4. FEI Number 59-2774379	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
SIEGFRIED, JAMES 7608 19TH AVENUE DRIVE WEST BRADENTON, FL 34209				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MEESTER, BARBARA		NAME	SCHOENFELDER, RON	
STREET ADDRESS	4611 17TH AVE WEST		STREET ADDRESS	107 68th ST. NW.	
CITY-ST-ZIP	BRADENTON, FL 34209		CITY-ST-ZIP	BRADENTON, FL 34209	
TITLE	T	<input type="checkbox"/> Delete	TITLE	Pamela Hunt	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MACK, FREDERICK J		NAME	3909 30th Lane E	
STREET ADDRESS	2718 37TH STREET WEST		STREET ADDRESS	Bradenton, FL 34208	
CITY-ST-ZIP	BRADENTON, FL 34205		CITY-ST-ZIP		
TITLE	C	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EVANS, KEVIN		NAME		
STREET ADDRESS	6606 29TH AVENUE WEST		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34209		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POTTER, STEPHEN E		NAME		
STREET ADDRESS	1205 89TH ST NW		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34209		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREEN, MARLENE		NAME		
STREET ADDRESS	6607 1ST AVE WEST		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34209		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARLISLE, MARY		NAME		
STREET ADDRESS	201 22ND ST CT NE		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34208		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>FREDERICK J. MACK</u>		Date: <u>3/28/07</u>		Daytime Phone #: <u>941-758-7107</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					