

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47053

FILED
Feb 13, 2012
Secretary of State

Entity Name: NEW HORIZON CHURCH, A UNITED METHODIST CONGREGATION, INC.

Current Principal Place of Business:

3 NORTH SUWANNEE AVENUE
DAVENPORT, FL 33837 US

New Principal Place of Business:

3 NORTH SUWANNEE AVENUE
DAVENPORT, FL 33836 US

Current Mailing Address:

21 S. SECOND ST
HAINES CITY,, FL 33844

New Mailing Address:

FEI Number: 59-6141889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, JOYCE
21 S. SECOND ST
HAINES CITY, FL 33844 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: TC
Name: CHRISTENSON, HAROLD
Address: 3060 HWY 17-92 LOT 111
City-St-Zip: HAINES CITY, FL 33844

Title: TCS
Name: WEED, JULIE
Address: 1701 COMMERCE AVE LOT 63
City-St-Zip: HAINES CITY, FL 33844

Title: T
Name: CORYER, CONNIE
Address: 208 E CYPRESS ST P.O. BOX 995
City-St-Zip: DAVENPORT, FL 33836

Title: T
Name: COONS, MARION
Address: 112 E. PALMETTO ST
City-St-Zip: DAVENPORT, FL 33837

Title: T
Name: CREWS, CURTIS
Address: 207 E. MAPLE ST. P.O. BOX1018
City-St-Zip: DAVENPORT, FL 33836

Title: T
Name: HALTER, RUTH
Address: 1101 CENTER CREST BLVD.
City-St-Zip: DAVENPORT, FL 33837

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: JOYCE ANDERSON

RA

02/13/2012

Electronic Signature of Signing Officer or Director

Date