

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001242

FILED
Apr 21, 2009
Secretary of State

Entity Name: RUSKIN UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

105 FOURTH STREET NW
RUSKIN, FL 33570

New Principal Place of Business:

Current Mailing Address:

PO BOX 745
RUSKIN, FL 33570

New Mailing Address:

PO BOX 745
RUSKIN, FL 33575

FEI Number: 59-0994487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMSON, HUGH
143 ST. ANNE'S CIRCLE EAST
APOLLO BEACH, FL 33572 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: C () Delete
Name: WILLIAMSON, HUGH
Address: 143 ST. ANNE'S CIRCLE EAST
City-St-Zip: APOLLO BEACH, FL 33572

Title: VC () Delete
Name: GRAY, MATTHEW
Address: 901 CHIPAWAY DR
City-St-Zip: APOLLO BEACH, FL 33572

Title: S () Delete
Name: HUNTER, MARY
Address: 1117 GOLFVIEW WOODS DR
City-St-Zip: RUSKIN, FL 33570

Title: T () Delete
Name: GAUSCHE, CHARLES
Address: 6517 SENEGAL PALM WAY
City-St-Zip: APOLLO BEACH, FL 33572

Title: D () Delete
Name: ADAMS, ROBERT
Address: 214 SW 6TH AVENUE
City-St-Zip: RUSKIN, FL 33570

Title: D () Delete
Name: STRICKLAND, PATRICK
Address: 311 MANATEE DR
City-St-Zip: RUSKIN, FL 33570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VC (X) Change () Addition
Name: HUMPHREY, ALLEN
Address: 909 ALLEGRO LANE
City-St-Zip: APOLLO BEACH, FL 33572

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

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

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

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

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: CHARLES GAUSCHE

T

04/21/2009

Electronic Signature of Signing Officer or Director

Date