2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2001 8:00 am
Secretary of State
05-24-2001 90503 019 ****61.25

DOCUMENT # 734149

1. Entity Name

GEORGIANA UNITED METHODIST CHURCH, INC.

Principal Place of Business	Mailing Address
3925 S. TROPICAL TRAIL MERRITT ISLAND FL 32952 US	3925 S. TROPICAL TRAIL MERRITT ISLAND FL 32952 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2113927 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RAMON, MEA B
2350 PINEAPPLE PL
MERRITT ISLAND FL 32952

7. Name and Address of New Registered Agent

Name ATKINSON, JOHN L.
Street Address (P.O. Box Number is Not Acceptable) 3925 WILD PINE LANE
City MERRIT ISLAND FL Zip Code 32952

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.

SIGNATURE John L. ATKINSON CHAIRMAN BOARD of TRUSTEES 2/6/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TR MCCAIN, JENNIFER 425 CATAMARAN DRIVE #68 MERRITT ISLAND FL 32953	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TRC JOHN L. ATKINSON 3925 WILD PINE MERRIT ISLAND, FL 32952 — ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TR BUZZ, DEAN 600 MILFORD POINT ROAD MERRITT ISLAND FL 32953	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TRUSTEE JERRY DROKAW 1313 SHADY LANE MERRIT ISLAND FL 32952 — ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TRC RAMON, MEA B 2350 PINEAPPLE PL MERRITT ISLAND FL 32952	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~TRC~~ TRUSTEE — ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TR THIRWELL, MARK AD55 OLD SETTLEMENT ROAD MERRITT ISLAND FL 32952	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TR PAYNE, WALTER 321 DORSAT DRIVE COCOA BEACH FL 32931	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE CHAIRMAN & SECRETARY of TRUSTEES LESLIE OWENS 1070 SHADY LANE MERRIT ISLAND, FL 32952 — ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	IVC HALL, SUSAN 1070 OLD PARSONAGE DR MERRITT ISLAND FL 32952	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TRUSTEE WARREN WILEY 4225 OVERHILL DRIVE MERRIT ISLAND, FL 32952 — ☐ Change ☑ Addition

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: /s/ SIGNATURE REQUIRED JOHN L. ATKINSON 2/6/2001 321-452-7523
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #