2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007927

FILED Mar 08, 2005 Secretary of State

Entity Name: EVERGLADES COMMUNITY CHURCH, A UNITED METHODIST CONGREGATION, INC.

Current Principal Place of Business: New Principal Place of Business:

20170 PINES BLVD 20871 JOHNSON STREET

SUITE 101 SUITE 302

PEMBROKE PINES, FL 33029 PEMBROKE PINES, FL 33029

New Mailing Address: **Current Mailing Address:**

20170 PINES BLVD 20871 JOHNSON STREET

SUITE 101 SUITE 302

PEMBROKE PINES, FL 33029 PEMBROKE PINES, FL 33029

FEI Number: 65-0701099 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JONES, PATRIC L ESQ 300 S.E. 19TH STREET

FORT LAUDERDALE, FL 33316 US

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:

Name:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete Name:

GREEN, M. EDWIN III GREEN, M. EDWIN III 20170 PINES BLVD., SUITE 302 Address: 20871 JOHNSON STREET, SUITE 101 Address:

City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: PEMBROKE PINES, FL 33029

Title: () Delete Title: (X) Change () Addition

ESCOTO, MAGGIE L Name: KORN, DON Name:

Address: 20170 PINES BLVD., SUITE 302 Address: 20871 JOHNSON STREET, SUITE 101 City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: PEMBROKE PINES, FL 33029

Title: () Delete Title: TR (X) Change () Addition MONTGOMERY, JENNIFER TURPIN, TOM Name: Name:

20170 PINES BLVD., SUITE 302 20871 JOHNSON STREET, SUITE 101 Address: Address:

City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: PEMBROKE PINES, FL 33029

Title: () Delete Title: (X) Change () Addition

Name: HENG, PATRICIA Name: HENG, PATRICIA

20170 PINES BLVD., SUITE 302 20871 JOHNSON STREET, SUITE 101 Address: Address: City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: PEMBROKE PINES, FL 33029

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TRICIA HENG S 03/08/2005