2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17686

FILED Feb 15, 2006 Secretary of State

Entity Name: FIRST UNITED METHODIST CHURCH OF PUNTA GORDA, INC.

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

507 W. MARION AVENUE PUNTA GORDA, FL 33950

Current Mailing Address: New Mailing Address:

507 W. MARION AVENUE PUNTA GORDA, FL 33950

FEI Number: 59-1293904 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:

ADAMS, STEVE WEBB, ELLEN 3436 NIGHTHAWK CT.

PUNTA GORDA, FL 33950 US PUNTA GORDA, FL 33950 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: ELLEN WEBB 02/15/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 HELPHENSTINE, JOANN
 Name:
 LEE, RUSTY

 Address:
 5570 RIVERSIDE DRIE
 Address:
 1835 CITRON STREET

 City-St-Zip:
 PUNTA GORDA, FL
 City-St-Zip:
 PT. CHARLOTTE, FL 33980

Title: TR () Delete Title: TR (X) Change () Addition Name: ORAVEC, GERALD Name: WEBB, ELLEN

Address: 260 BELVEDERE CT Address: 3436 NIGHTHAWK CT.
City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: PUNTA GORDA, FL 33950

Title: TR () Delete Title: TR (X) Change () Addition
Name: ADAMS, STEVE Name: HELPHENSTINE, JOANN

Address: 4032 MALTESE Address: 181 TROPICANA DR. #1422
City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: PUNTA GORDA, FL 33982

I hereby certify that the information supplied with this filing does not qualify for the 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: ELLEN WEBB TR 02/15/2006