2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718119

Entity Name: LAKE MAGDALENE UNITED METHODIST CHURCH, INC.

FILED Apr 15, 2016 Secretary of State CC4625688943

Current Principal Place of Business:

2902 W. FLETCHER AVE. TAMPA, FL 33618

Current Mailing Address:

2902 W. FLETCHER AVE. TAMPA, FL 33618

FEI Number: 59-0931265 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAIN, HILARY K 18720 CHAVILLE RD. LUTZ, FL 33558 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:

Electronic Signature of Registered Agent Date

Title

TRUSTEE

Officer/Director Detail:

Title TRUSTEE, TREASURER Title TRUSTEE

NameMILLER, STEPHEN KNameSAUNDERS, MARGARET AAddress12401 N 22ND ST.Address15701 SPRINGMOSS LANE

APT. H502 City-State-Zip: TAMPA FL 33624

City-State-Zip: TAMPA FL 33612

Title TRUSTEE, CHAIRMAN

Name PETRUS, CYNTHIA C
Name SESSUMS, TERRELL
Address 5502 CAMILLE COURT

Address 12401 N 22ND STREET

APT C5008 City-State-Zip: LUTZ FL 33558

City-State-Zip: TAMPA FL 33612

Title TRUSTEE Name ADCOCK, AMANDA HOUSE

Name LANIGAN, TAMIE GENE GRATER Address 14514 THORNFIELD COURT

Address 14048 TROUVILLE DR. City-State-Zip: TAMPA FL 33624

#4

City-State-Zip: TAMPA FL 33624 Title TRUSTEE

 Title
 TRUSTEE, VC
 Address
 7901 GOLDEN GLEN PL

 Name
 WORDEN, BRENT
 City-State-Zip:
 TAMPA FL 33615

Address 3740 THORNWOOD DR

City-State-Zip: TAMPA FL 33618 Continues on page 2

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: TERRELL SESSUMS CHAIRMAN, TRUSTEES 04/15/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title TRUSTEE Title TRUSTEE

Name ROBERTS, DALE Name HUNSBERGER, LORNE W.

Address 2055 W BEARSS AVE Address 4202 WINDTREE DR
City-State-Zip: TAMPA FL 33618 City-State-Zip: TAMPA FL 33624