

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734149

Entity Name: GEORGIANA UNITED METHODIST CHURCH, INC.**Current Principal Place of Business:**3925 S TROPICAL TRAIL
MERRITT ISLAND, FL 32952**Current Mailing Address:**3925 S TROPICAL TRAIL
MERRITT ISLAND, FL 32952 US**FEI Number: 59-2113927****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**BENNETT, KOHN
3925 S TROPICAL TRAIL
MERRITT ISLAND, FL 32952 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**Officer/Director Detail :**

Title	C
Name	BENNETT, KOHN
Address	4080 OLD SETTLEMENT ROAD
City-State-Zip:	MERRITT ISLAND FL 32952

Title	VC
Name	BEARDALL, JAY
Address	405 RIO VISTA LANE
City-State-Zip:	MERRITT ISLAND FL 32952

Title	T
Name	HABER, GWEN
Address	1130 REBECCA DRIVE
City-State-Zip:	MERRITT ISLAND FL 32952

Title	S
Name	KUBE, DONNA
Address	3930 CROOKED MILE ROAD
City-State-Zip:	MERRITT ISLAND FL 32952

Title	C
Name	MAYER, JOE
Address	520 JILLOTUS STREET
City-State-Zip:	MERRITT ISLAND FL 32952

Title	REV
Name	CALHOUN, KEVIN A
Address	3939 CROOKED MILE RD.
City-State-Zip:	MERRITT ISLAND FL 32952

Title	ADMINISTRATIVE ASSISTANT
Name	BECKER, MONA R
Address	3925 S TROPICAL TRAIL
City-State-Zip:	MERRITT ISLAND FL 32952

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: MONA BECKER**ADMINISTRATIVE
ASSISTANT****01/24/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date