2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751377

Entity Name: CRAWFORDVILLE UNITED METHODIST CHURCH, INC.

FILED
Apr 12, 2022
Secretary of State
1053191526CC

Current Principal Place of Business:

176 OCHLOCKNEE STREET CRAWFORDVILLE. FL 32327

Current Mailing Address:

P.O. BOX 37

CRAWFORDVILLE, FL 32326

FEI Number: 59-3362769 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COOKSEY, LEMUEL 213 WHIDDEN LAKE RD. CRAWFORDVILLE, FL 32327 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: LEMUEL COOKSEY 04/12/2022

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title EXECUTIVE SECRETARY Title TRUSTEE

NameSLOAN, FERNNameJOHNSON, CHARLESAddress10425 REBEL CIRCLEAddress25 STARLING TRACE

City-State-Zip: TALLAHASSEE FL 32305 City-State-Zip: CRAWFORDVILLE FL 32327

Title TRUSTEE Title TRUSTEE

Name HARRELL, STEVE Name HERNDON, CHRISTINA

Address 148 SCENIC STREAM CIRCLE Address 75 MULBERRY CIRCLE

City-State-Zip: CRAWFORDVILLE FL 32327 City-State-Zip: CRAWFORDVILLE FL 32327

Title TRUSTEE Title TRUSTEE

Name CRUM, GARY Name TOOKE, SUSIE

Address 632 JACK CRUM RD. Address 161 COUNTRY CLUB DR

City-State-Zip: CRAWFORDVILLE FL 32327 City-State-Zip: CRAWFORDVILLE FL 32327

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: FERN SLOAN

Electronic Signature of Signing Officer/Director Detail

SECRETARY/TREASURER 04/12/2022

Date