

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004148

FILED
Jan 31, 2022
Secretary of State
2042774649CC

Entity Name: PENSACOLA UNITED METHODIST COMMUNITY MINISTRIES, INC.

Current Principal Place of Business:

2600 W. STRONG ST.
PENSACOLA, FL 32505

Current Mailing Address:

2600 W. STRONG ST.
PENSACOLA, FL 32505

FEI Number: 61-1523951

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NOBLE, ROBIN C. REV.
2600 W. STRONG ST.
PENSACOLA, FL 32505 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: ROBIN C. NOBLE

01/31/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIRMAN	Title	EXECUTIVE DIRECTOR
Name	ROBERTS, HENRY E. DR.	Name	NOBLE, ROBIN C.
Address	424 RUE DE ROCHEBLAVE	Address	2600 W. STRONG ST.
City-State-Zip:	PENSACOLA FL 32507	City-State-Zip:	PENSACOLA FL 32505
Title	SECRETARY	Title	TREASURER
Name	SANDERS, WHITNEY EVANS	Name	MOSELEY, DIXON
Address	1320 PICKENS AVE	Address	9021 WOODRUN LN
City-State-Zip:	PENSACOLA FL 32503	City-State-Zip:	PENSACOLA FL 32514
Title	OFFICER	Title	MANAGER
Name	MOSER, MIKE	Name	MARTIN, CHARLIE
Address	9 HILLBROOK WAY	Address	62211 GREEN ACREAS DR.
City-State-Zip:	PENSACOLA FL 32503	City-State-Zip:	PENSACOLA FL 32526
Title	MANAGER	Title	MANAGER
Name	PETERS, JERRY	Name	DAVIS, MARCEL
Address	2330 AEGEAN TERRACE	Address	920 W. GOVERNMENT ST
City-State-Zip:	PENSACOLA FL 32507	City-State-Zip:	PENSACOLA FL 32502

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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: ROBIN NOBLE

EXECUTIVE DIRECTOR

01/31/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title MANAGER
Name SHELTON, GERALD
Address 6072 SUNNYRIGE DR.
City-State-Zip: MILTON FL 32570