

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26147

Entity Name: SKYCREST UNITED METHODIST CHURCH, INC.**Current Principal Place of Business:**2045 DREW STREET
CLEARWATER, FL 33765**Current Mailing Address:**2045 DREW STREET
CLEARWATER, FL 33765 US**FEI Number:** 59-0973010**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PESTEL, MICHAEL
1427 ADAMS CIRCLE EAST
LARGO, FL 33771 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	OFFICER
Name	LONG, DARELL
Address	9378 127TH AVE N
City-State-Zip:	LARGO FL 33773

Title	DIRECTOR
Name	JESTER, PHIL
Address	2086 LONG BOW LANE
City-State-Zip:	CLEARWATER FL 33764

Title	OFFICER
Name	WINKLER, JEFF
Address	770 ISLAND WAY, #103
City-State-Zip:	CLEARWATER FL 33767

Title	OFFICER
Name	STILLWELL, JENNIFER
Address	1633 MONTEREY DR
City-State-Zip:	CLEARWATER FL 33756

Title	OFFICER
Name	LIEBICH, KEN
Address	1004 WELLINGTON DRIVE
City-State-Zip:	CLEARWATER FL 33764

Title	OFFICER
Name	BOUDREAU, JUSTIN
Address	1858 HARMONY DRIVE
City-State-Zip:	CLEARWATER FL 33756

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: PHIL JESTER**DIRECTOR****02/07/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date