

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47053

FILED
Jan 11, 2016
Secretary of State
CC0302056230

Entity Name: NEW HORIZON CHURCH, A UNITED METHODIST CONGREGATION, INC.

Current Principal Place of Business:

201 OAK AVE E
HAINES CITY, FL 33844

Current Mailing Address:

P.O. BOX 455
HAINES CITY,, FL 33845 US

FEI Number: 59-6141889

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEED, JULIE
201 OAK AVE. E
HAINES CITY,, FL 33844 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: JULIE WEED

01/11/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TC
Name CHRISTENSON, HAROLD
Address 3060 HWY 17-92 LOT 111
City-State-Zip: HAINES CITY FL 33844

Title TRUSTEE
Name ANDERSON, JOYCE
Address 601 CENTER CREST BLVD.
City-State-Zip: DAVENPORT FL 33837

Title T
Name LARSON , DARIN
Address 1004 AQUA VISTA DR.
City-State-Zip: HAINES CITY FL 33844

Title T
Name COONS, JAMES
Address 112 E. PALMETTO STREET
City-State-Zip: DAVENPORT FL 33837

Title T
Name BONIE, JOHN
Address 37 ASPEN DRIVE
City-State-Zip: HAINES CITY FL 33834

Title T
Name HENSELER, WIL
Address 750 MYSTERY HOUSE RD
City-State-Zip: DAVENPORT FL 33837-9063

Title TRUSTEE
Name CLEMENTS, LARRY
Address P.O. BOX 142
City-State-Zip: DAVENPORT FL 33836

Title TRUSTEE
Name DENTLER, LEWIS
Address 322 CANNA LANE
City-State-Zip: DAVENPORT FL 33837

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: JULIE WEED

TREASURER

01/11/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name LOCKRIDGE, ORA D
Address 377 PANSY STREET
City-State-Zip: DAVENPORT FL 33837

Title CORRESPONDING SECRETARY
Name WEED, JULIE
Address 1701 COMMERCE AVE. LOT # 63
City-State-Zip: HAINES CITY FL 33844

Title TRUSTEE
Name HAINES, BRUCE
Address 423 GOLDEN LANE
City-State-Zip: HAINES CITY FL 33844