


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90192 048 ****61.25

DOCUMENT # 700282 1. Entity Name ST. ANDREWS UNITED METHODIST CHURCH OF FORT LAUDERDALE, INC.	
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Principal Place of Business 1100 N. ANDREWS AVE. FT. LAUDERDALE, FL 33311	Mailing Address 1100 N. ANDREWS AVE. FT. LAUDERDALE, FL 33311
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DO NOT WRITE IN THIS SPACE

40068303



01052007 No Chg-NP CR2E037 (4/08)

4. FEI Number 59-0872676	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WOOD, HARRY 361 NW 35 COURT FT LAUDERDALE, FL 33309

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8. 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. I am familiar with, and accept the obligations of registered agent.


SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WOOD, HARRY 361 NW 35 COURT FT. LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KOBAYASHI, TAMOTSU 314 S.E. 13TH ST. FT. LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, LARRY 4311 N.W. 33RD ST. FT. LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUTLER, EDWIN 1818 LAUDERDALE MANORS DR. FT. LAUDERDALE, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  HARRY WOOD JR.	Date 4/14/07 Daytime Phone # 954-782-2873
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