

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700788

FILED  
Feb 22, 2008  
Secretary of State

Entity Name: MERRELL UNITED METHODIST CHURCH, INC.

## Current Principal Place of Business:

3900 N STATE RD 7  
FT LAUDERDALE, FL 333191877

## New Principal Place of Business:

## Current Mailing Address:

3900 N STATE RD 7  
FT LAUDERDALE, FL 333191877

## New Mailing Address:

FEI Number: 59-1099703

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOUSTON, HARRY R  
3900 N STATE RD 7  
FT LAUDERDALE, FL 33319 US

## Name and Address of New Registered Agent:

O'NEAL, FELECIA A  
3900 N STATE RD 7  
FT LAUDERDALE, FL 33319 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: FELECIA O'NEAL

02/22/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: COOMBS, FRANKLYN  
Address: 9547 VERONALK BLVD  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D ( ) Delete  
Name: COOMBS, KEISHA  
Address: 1323 SUSSEX DR  
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: DS (X) Delete  
Name: SMITH, COLIN  
Address: 9608 NW 49TH STREET  
City-St-Zip: SUNRISE, FL 33351

Title: D ( ) Delete  
Name: MCCLOUD, DEBBIE  
Address: PO BOX 740876  
City-St-Zip: BOYNTON BEACH, FL 33474

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS (X) Change ( ) Addition  
Name: TABOIS, PATRICIA  
Address: 6137 PINE TERRACE  
City-St-Zip: PLANTATION, FL 33317

Title: MR (X) Change ( ) Addition  
Name: MCKAIL, LOVELL  
Address: 3920 NW 50TH AVE  
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: REV (X) Change ( ) Addition  
Name: MCCLOUD, DEBBIE  
Address: 2850 SW 27 AVE  
City-St-Zip: MIAMI, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: C. MARCUS JENKINS

MR

02/22/2008

Electronic Signature of Signing Officer or Director

Date