

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700953

FILED  
Mar 02, 2012  
Secretary of State

**Entity Name:** PLANTATION UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

1001 N W 70 AVE  
PLANTATION, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

1001 N W 70 AVE  
PLANTATION, FL 33313

**New Mailing Address:**

**FEI Number:** 59-0974384

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GORDON, LARRI  
1001 NW 70 AVE  
PLANTATION, FL 33313 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WILLARD, DAVID  
Address: 1341 NW 71 AVE  
City-St-Zip: PLANTATION, FL 33313

Title: VD  
Name: FRANK, RUSSELL  
Address: 6041 SW 18TH STREET  
City-St-Zip: PLANTATION, FL 33317

Title: D  
Name: MCWHERTOR, DANIEL  
Address: 6350 SW 101ST AVENUE  
City-St-Zip: PLANTATION, FL 33324

Title: D  
Name: MCCREDIE, DONALD  
Address: 1561 SW 72 AVENUE  
City-St-Zip: PLANTATION, FL 33317

Title: D  
Name: CROSS, KATHY  
Address: 861 GARDEN COURT  
City-St-Zip: PLANTATION, FL 33317

Title: D  
Name: BOUWENS, DAVID  
Address: 1431 SW 66TH TERRACE  
City-St-Zip: PLANTATION, FL 33317

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: DAVID F. WILLARD

PD

03/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date