

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701998

FILED
Apr 29, 2005
Secretary of State

Entity Name: ALOMA UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

ALOMA UNITED METHODIST CHURCH
3045 ALOMA AVENUE
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

ALOMA UNITED METHODIST CHURCH
3045 ALOMA AVENUE
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 59-6046991

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATHENEY, C. DONALD
970 ARRINGTON CIRCLE
OVIEDO, FL 32765 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: T () Delete
Name: HART, THOMAS
Address: 14956 FAVERSHAM CIR.
City-St-Zip: ORLANDO, FL 32826

Title: S/T () Delete
Name: BERTRAM, PAUL
Address: 1461 FAIRWAY OAKS DR.
City-St-Zip: CASSELBERRY, FL 32707

Title: P/T () Delete
Name: FULLER, E. ALLEN
Address: 8729 PINE BARRENS DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: T () Delete
Name: TILBURY, KEVIN W
Address: 311 N. RANGER BLVD.
City-St-Zip: WINTER PARK, FL 32792

Title: T () Delete
Name: STROUT, JOHN
Address: 1551 NOTTINGHAM DRIVE
City-St-Zip: WINTER PARK, FL 32792

Title: V/T () Delete
Name: SHAW, THERESA Y
Address: 4419 FORELAND PLACE
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: TILBURY, KEVIN W
Address: 311 N. RANGER BLVD.
City-St-Zip: WINTER PARK, FL 32792

Title: D (X) Change () Addition
Name: JAMES, DALE
Address: 4718 JETTY ST.
City-St-Zip: ORLANDO, FL 32817

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: E. ALLEN FULLER

P/T

04/29/2005

Electronic Signature of Signing Officer or Director

Date