

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 01, 2008  
Secretary of State**

DOCUMENT# 702017

Entity Name: PINE CASTLE METHODIST CHURCH INC

**Current Principal Place of Business:**

ATTENTION - FINANCIAL SECRETARY  
731 EAST FAIRLANE AVENUE  
ORLANDO, FL 32809

**New Principal Place of Business:**

ATTENTION - FINANCIAL SECRETARY  
801 FAIRLANE AVENUE  
ORLANDO, FL 32809

**Current Mailing Address:**

5933 RANDOLPH AVENUE  
ORLANDO, FL 32809

**New Mailing Address:**

FEI Number: 59-0816459      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NUMBERS, GREGORY  
5933 RANDOLPH AVENUE  
ORLANDO, FL 32809    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: P ( ) Delete  
Name: HURLBURT, ROGER  
Address: 5933 RANDOLPH AVE  
City-St-Zip: ORLANDO, FL 32809

Title: SD ( ) Delete  
Name: NUMBERS, GREGORY  
Address: 5933 RANDOLPH AVENUE  
City-St-Zip: ORLANDO, FL 32809

Title: VD ( ) Delete  
Name: WILLIAMS, LYNN  
Address: 5933 RANDOLPH AVE  
City-St-Zip: ORLANDO, FL 32809

Title: T ( ) Delete  
Name: HASKELL, KEITH  
Address: 6601 ST PARTIN 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: T (X) Change ( ) Addition  
Name: HASKELL, KEITH  
Address: 5933 RANDOLPH AVE  
City-St-Zip: ORLANDO, FL 32809

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: GREGORY NUMBERS

SD

02/01/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date