

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 15, 2009
Secretary of State**

DOCUMENT# 702017

Entity Name: PINE CASTLE METHODIST CHURCH INC

Current Principal Place of Business:

ATTENTION - FINANCIAL SECRETARY
801 FAIRLANE AVENUE
ORLANDO, FL 32809

New Principal Place of Business:

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: 5933 RANDOLPH AVE
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CENTER, DAVID
Address: 5933 RANDOLPH AVE
City-St-Zip: ORLANDO, FL 32809

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

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

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

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

01/15/2009

Electronic Signature of Signing Officer or Director

_____ Date