

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 27, 2007
Secretary of State

DOCUMENT# 702224

Entity Name: LAKEWOOD UNITED METHODIST CHURCH, INC.**Current Principal Place of Business:**5995 DR. ML KING ST SO
ST. PETE, FL 33705 US**New Principal Place of Business:****Current Mailing Address:**5995 DR. ML KING ST SO
ST. PETE, FL 33705 US**New Mailing Address:****FEI Number:** 59-0954123**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MAPIER, SUE ANN
2168 C CORRINE CT S
SAINT PETERSBURG, FL 33712 US**Name and Address of New Registered Agent:**BARKER, CAROL
1050 59 AVENUE SOUTH
SAINT PETERSBURG, FL 33705 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: CAROL BARKER

06/27/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOLLAND, CAROL
Address: 2222 PINELLAS PT DR S
City-St-Zip: ST. PETERSBURG, FL 33712

Title: D () Delete
Name: CLEVELLE, LYNN
Address: 5347 37 ST SO
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: T () Delete
Name: NAPIER, SUE ANN
Address: 2188 C CORRINE CT SO
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: P () Delete
Name: KNIGHT, JOANN
Address: 5216 6 ST SO
City-St-Zip: SAINT PETERSBURG, FL 33705

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: HITCHCOCK, MARGE
Address: 6618 CANTON ST SO
City-St-Zip: SAINT PETERSBURG, FL 33712

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: JOANN KNIGHT

P

06/27/2007

Electronic Signature of Signing Officer or Director

Date