

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703101

FILED
Mar 16, 2009
Secretary of State

Entity Name: LAKEWOOD PARK UNITED METHODIST CHURCH INC.

Current Principal Place of Business:

5405 TURNPIKE FEEDER RD
FT PIERCE, FL 34951

New Principal Place of Business:

Current Mailing Address:

5405 TURNPIKE FEEDER RD
FT PIERCE, FL 34951

New Mailing Address:

FEI Number: 59-2456953

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NUSBAUM, VIRGINIA E
5405 TURNPIKE FEEDER ROAD
FORT PIERCE, FL 34951 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: D () Delete
Name: STEWART, JAY E
Address: 12921 W. ANGLE RD
City-St-Zip: FORT PIERCE, FL 34945

Title: D () Delete
Name: DESABRAIS, DONALD
Address: 6885 20TH ST. APT 378
City-St-Zip: VERO BEACH, FL 32966

Title: D () Delete
Name: SWEAT, LEAH
Address: 1128 SOUTH 7TH STREET
City-St-Zip: FORT PIERCE, FL 34950

Title: D () Delete
Name: RIGGLE, PEG
Address: 48 CALLE DE LAGOS
City-St-Zip: FORT PIERCE, FL 34951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STEWART, JAY E PRES.
Address: 12921 W. ANGLE RD
City-St-Zip: FORT PIERCE, FL 34945

Title: O (X) Change () Addition
Name: DIAL, LOU VICE PR
Address: 4804 PALEO PINES
City-St-Zip: FORT PIERCE, FL 34951

Title: O (X) Change () Addition
Name: ISAACSON, KATHY SEC
Address: 14583 DULCE REAL
City-St-Zip: FORT PIERCE, FL 34951

Title: O (X) Change () Addition
Name: RIGGLE, PEG TREAS
Address: 48 CALLE DE LAGOS
City-St-Zip: FORT PIERCE, FL 34951

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: JAY E. STEWART

PRES

03/16/2009

Electronic Signature of Signing Officer or Director

Date