

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 703285

**FILED**  
**Feb 15, 2011**  
**Secretary of State**

**Entity Name:** CASON UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

342 NORTH SWINTON AVE.  
DELRAY BEACH, FL 33444

**New Principal Place of Business:**

**Current Mailing Address:**

342 NORTH SWINTON AVE.  
DELRAY BEACH, FL 33444

**New Mailing Address:**

**FEI Number:** 59-6031865

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATHEWS, GEORGE W ESQ  
1325 S. CONGRESS AVENUE  
104  
BOYNTON BEACH, FL 33426 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: PC  
Name: MANNERS, LISA  
Address: 342 N SWINTON AVE  
City-St-Zip: DELRAY BEACH, FL 33444

Title: T  
Name: ADAMS, WILLIAM S  
Address: 19 NW 24TH COURT  
City-St-Zip: DELRAY BEACH, FL 33444

Title: D  
Name: CASEBOLT, NANCY  
Address: 702 N. SWINTON AVENUE  
City-St-Zip: DELRAY BEACH, FL 33444

Title: D  
Name: JENNINGS, REBECCA A  
Address: 12937 COCOA PINE DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D  
Name: LOVE, FRED DR.  
Address: 315 NW 18TH STREET  
City-St-Zip: DELRAY BEACH, FL 33444

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM S. ADAMS

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02/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date