2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703473

FILED Jan 04, 2008 Secretary of State

Entity Name: THE WINTER PARK METHODIST CHURCH, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 125 N INTERLACHEN AVE WINTER PARK, FL 32789 **Current Mailing Address: New Mailing Address:** 125 N INTERLACHEN AVE WINTER PARK, FL 32789 FEI Number: 59-0674257 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WHWW, INC 390 N. ORANGE AVE **SUITE 1500** ORLANDO, FL 32801 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition NOECKER, SCOTT BROOKS, AMY Name: Name: 1261 ARLINGTON PLACE Address: 1200 SHARON PLACE Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789 Title: Title: () Change () Addition () Delete COX, STACY Name: Name: Address: 820 BROCK ST Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: VC () Delete Title: (X) Change () Addition COOPER, KEN SNEEDEN, BRIAN Name: Name: 2101 MOWHAWK TRAIL 1242 SARA COURT Address: Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: WINTER PARK, FL 32789 Title: () Delete Title: (X) Change () Addition Name: BROOKS, AMY Name: OWENS, GORDON 1200 SHARON PLACE Address: Address: 1515 GLENCOE RD City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789 Title: () Delete Title: () Change () Addition ANDERSON, PHIL Name: Name: 2020 FAWSETT RD Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: (X) Delete Title: () Change () Addition COOK, BILL Name: Name: Address: 1028 PEBBLE BEACH EAST Address: WINTER SPRINGS, FL 32708 City-St-Zip: 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: AMY BROOKS C 01/04/2008