2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704268

FILED Jaņ 3<u>0, 2</u>006 Secretary of State

Entity Name: THE FLORIDA UNITED METHODIST CHILDREN'S HOME, INC.

Current Principal Place of Business: New Principal Place of Business: 51 MAIN STREET ENTERPRISE, FL 32725 **Current Mailing Address: New Mailing Address:** 51 MAIN STREET ENTERPRISE, FL 32725 FEI Number: 59-0638479 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: CARMICHEL, ALEXANDER C DAVIDSON, SCOTT W 51 MAIN STREET 51 MAIN STREET ENTERPRISE, FL 32725 ENTERPRISE, FL 32725 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: SCOTT W. DAVIDSON 01/30/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: TRST () Change () Addition () Delete JETER, RICHARD Name: Name: 2127 SW 122ND ST Address: Address: City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: Title: TRC () Delete Title: () Change () Addition Name: DUNCAN, MONTFORT Name: Address: PO BOX 3767 Address: City-St-Zip: LAKELAND, FL 33802 City-St-Zip: Title: () Delete Title: (X) Change () Addition CARMICHEL, ALEXANDER C IV Name: DAVIDSON, SCOTT W Name: Address: 51 MAIN STREET Address: 51 MAIN STREET City-St-Zip: ENTERPRISE, FL City-St-Zip: ENTERPRISE, FL Title: **TRVC** () Delete Title: () Change () Addition Name: FOSHEE, SARA Name: Address: 2930 BEAUCLERC RD Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SCOTT W DAVIDSON Ρ 01/30/2006