

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704268

FILED
Jan 09, 2007
Secretary of State

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

Current Principal Place of Business:

51 MAIN STREET
ENTERPRISE, FL 32725

New Principal Place of Business:

Current Mailing Address:

51 MAIN STREET
ENTERPRISE, FL 32725

New Mailing Address:

FEI Number: 59-0638479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLOWAY, MIKE P
51 MAIN STREET
ENTERPRISE, FL 32725 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: TRST () Delete
Name: JETER, RICHARD
Address: 2127 SW 122ND ST
City-St-Zip: GAINESVILLE, FL 32607

Title: TRC () Delete
Name: DUNCAN, MONTFORT
Address: PO BOX 3767
City-St-Zip: LAKELAND, FL 33802

Title: P () Delete
Name: GALLOWAY, MIKE
Address: 51 MAIN STREET
City-St-Zip: ENTERPRISE, FL

Title: TRVC () Delete
Name: FOSHEE, SARA
Address: 2930 BEAUCLERC RD
City-St-Zip: JACKSONVILLE, FL 32257

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TRS (X) Change () Addition
Name: JETER, RICHARD
Address: 2127 SW 122ND ST
City-St-Zip: GAINESVILLE, FL 32607

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

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

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

Title: TRT () Change (X) Addition
Name: INMAN, LEEANN
Address: 152 STOWE AVE
City-St-Zip: ORANGE PARK, FL 32073

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: MIKE GALLOWAY

P

01/09/2007

Electronic Signature of Signing Officer or Director

Date