2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704958

FILED Apr 08, 2009 Secretary of State

Entity Name: INDIAN RIVER CITY UNITED METHODIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 1355 CHENEY HWY TITUSVILLE, FL 32780 **Current Mailing Address: New Mailing Address:** 1355 CHENEY HWY TITUSVILLE, FL 32780 FEI Number: 59-1116408 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: COON, TERRY L 4101 HEMLOCK LANE TITUSVILLE, FL 32780 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 KELLY, JEAN BREEMAN, JEAN Name: Name: 1025 S. CARPENTER ROAD Address: 17363 WINDOVER WAY Address: City-St-Zip: TITUSVILLE, FL 32796 City-St-Zip: TITUSVILLE, FL 32780 Title: Title: () Delete () Change () Addition GILLESPIE, WILLIAM Name: Name: Address: 5205 BARNA AVE Address: City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: Title: V/D () Delete Title: () Change () Addition CERIALE, ALLAN Name: Name: Address: 6945 CALIPH AVE Address: City-St-Zip: TITUSVILLE, FL 32927 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: NOLLE, MATTHEW Name: LOVELESS, RICHARD 1301 MONTEGO STREET 6317 WHISPERING LANE Address: Address: City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: TITUSVILLE, FL 32780 Title: P/D () Delete Title: () Change () Addition MCCORMICK, TRENT Name: Name: 7230 HARTMAN ST Address: Address: City-St-Zip: COCOA, FL 32927 City-St-Zip: Title: () Delete Title: () Change () Addition ARNOLD, MARY Name: Name: Address: 2334 ARMOUR CT Address: TITUSVILLE, FL 32780 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: TRENT MCCORMICK P/D 04/08/2009