

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705487

FILED
Apr 15, 2009
Secretary of State

Entity Name: FIRST UNITED METHODIST CHURCH OF NEW PORT RICHEY, INC.

Current Principal Place of Business:

5901 INDIANA AVE
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

Current Mailing Address:

5901 INDIANA AVE
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

FEI Number: 59-1004598

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, CAROL
3922 PENSDALE DR.
NEW PORT RICHEY, FL 34652 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: D () Delete
Name: FAULKENBERG, VANCE
Address: 6840 RIVER ROAD
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: TRP () Delete
Name: SNELL, FREDERICK J
Address: 2109 OVERVIEW DR.
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: TRVP () Delete
Name: ZUKUNFT, DANA
Address: 4059 LA PASIDA LN
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TRVP (X) Change () Addition
Name: ZUKUNFT, DANA
Address: 8647 BRIDGEWATER DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655

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: CAROL MILLER

TRES

04/15/2009

Electronic Signature of Signing Officer or Director

Date