

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705782

FILED
Mar 28, 2009
Secretary of State

Entity Name: ST. PAUL UNITED METHODIST CHURCH OF LARGO, INC.

Current Principal Place of Business:

1199 HIGHLAND AVENUE
LARGO, FL 33770 US

New Principal Place of Business:

Current Mailing Address:

1199 HIGHLAND AVENUE
LARGO, FL 33770 US

New Mailing Address:

FEI Number: 59-1031675

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARD, R. CARLTON
1253 PARK
CLEARWATER, FL 33756 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: C () Delete
Name: HALL, DAVID
Address: 80 PINEWINDS BLVD
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: BURK, EMILIE
Address: 18 COUNTRY CLUB DR
City-St-Zip: LARGO, FL 33771

Title: VC () Delete
Name: COUSIN, GEORGE
Address: 3045 DOMINION CT.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D () Delete
Name: BAAD, SCOTT
Address: 1180 BLUFFS CIRCLE
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: TERBUSH, GAIL
Address: 2231 BUENA VISTA DR
City-St-Zip: CLEARWATER, FL 33764

Title: D () Delete
Name: BOSSARD, MARILYN
Address: 12931 88TH AVE N.
City-St-Zip: SEMINOLE, FL 33776

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VC (X) Change () Addition
Name: SIDES, LLOYD
Address: 1512 S FREDRICA AVE
City-St-Zip: CLEARWATER, FL 33756

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

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

Title: D (X) Change () Addition
Name: BARKER, JOHN
Address: 5008 IMPERIAL PALM DR
City-St-Zip: LARGO, FL 33771

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: DAVID HALL

C

03/28/2009

Electronic Signature of Signing Officer or Director

Date