## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 706471** 

FILED Jan 18, 2006 Secretary of State

Entity Name: THE CAPE CORAL FIRST UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4118 CORONADO PKWY CAPE CORAL, FL 33904 **Current Mailing Address: New Mailing Address:** 4118 CORONADO PKWY CAPE CORAL, FL 33904 FEI Number: 59-1156201 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: BRAUN, ERNEST F 3910 SW 26 AVENUE US CAPE CORAL, FL 33914 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 () Change () Addition WOODRUFF, PAMELA Name: Name: 4424 COUNTRY CLUB BLVD. Address: Address: CAPE CORAL, FL 33904 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition ARMSTRONG, DON Name: DEEMS, PHIL Name: Address: 4240 SE 20 PL. #109 Address: 2804 DEL PRADO BLVD. City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33904 Title: () Delete Title: () Change () Addition TUBB, WILLIAM B Name: Name: Address: 1424 SW 54 TERR Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: Title: () Delete Title: () Change () Addition SCHMIDT, CRAIG Name: Name: Address: 3019 SE 5 CT. Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: Title: () Delete Title: () Change () Addition FEATHER, GWEN Name: Name: 1807 SE 41 ST. #2-1 Address: Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition QUINN, JOHN FRANK, MARILYN Name: Name: Address: 2302 SW 51 ST. Address: 1634 SE 39 TERRACE CAPE CORAL, FL 33914 CAPE CORAL, FL 33904 City-St-Zip: 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: PAMELA ANN WOODRFF D 01/18/2006