

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706528

FILED
Feb 22, 2007
Secretary of State

Entity Name: CHRIST COMMUNITY UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

27000 SUNNYBROOK ROAD
PUNTA GORDA, FL 33983

New Principal Place of Business:

Current Mailing Address:

27000 SUNNYBROOK ROAD
PUNTA GORDA, FL 33983

New Mailing Address:

FEI Number: 59-2562346

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNOTT, LEONARD D
1512 RIO DE JANEIRO AVE UNIT 313
PUNTA GORDA, FL 33983 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: S () Delete
Name: NEWMAN, BARBARA
Address: 2240 HARBOUR DR
City-St-Zip: PUNTA GORDA, FL 33983

Title: D () Delete
Name: GRAHAM, MILLICENT
Address: 27264 SAN MARINO DR
City-St-Zip: PUNTA GORDA, FL US

Title: VP () Delete
Name: NEWMAN, RICHARD
Address: 2240 HARBOUR DR.
City-St-Zip: PUNTA GORDA, FL 33983 US

Title: PD () Delete
Name: KNOTT, LEONARD
Address: 1512 RIO DE JANEIRO APT 313
City-St-Zip: PUNTA GORDA, FL 33983 US

Title: D () Delete
Name: MCMANUS, GARY
Address: 2555 PEAR ST
City-St-Zip: PORT CHARLOTTE, FL 33948 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: PUILANDRE, ANNEISE
Address: 22450 PEACHLAND BLVD
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: D () Change (X) Addition
Name: COMMA, DENNIS
Address: 25372 PALADIN LANE
City-St-Zip: PORT CHARLOTTE, FL 33983

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: ANNEISE PUILANDRE

D

02/22/2007

Electronic Signature of Signing Officer or Director

Date