

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 707813

**FILED**  
**Feb 01, 2010**  
**Secretary of State**

**Entity Name:** THE ST. PAULS UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

1591 HIGHLAND AVENUE  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

1591 HIGHLAND AVENUE  
MELBOURNE, FL 32935

**New Mailing Address:**

**FEI Number:** 59-0806592

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PRICE, LINDA N  
1591 HIGHLAND AVE.  
MELBOURNE, FL 32935 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: PD  
Name: KNEPPER, JAMES  
Address: 4725 N. US HWY 1  
City-St-Zip: MELBOURNE, FL 32935

Title: VD  
Name: STANLEY, LEVON  
Address: 2231 ST. THERESA'S WAY  
City-St-Zip: MELBOURNE, FL 32935

Title: SD  
Name: SPEIGHTS, LOUISE  
Address: 1776 DODGE CIRCLE S  
City-St-Zip: MELBOURNE, FL 32935

Title: TD  
Name: PRICE, LINDA N  
Address: 151 MARTESIA WAY  
City-St-Zip: INDIAN HARBOUR BCH, FL 32937

Title: D  
Name: JOWERS, CAROLE  
Address: 4045 PARKWAY  
City-St-Zip: MELBOURNE, FL 32935

Title: D  
Name: FLAMM, RICHARD  
Address: 1992 ADAMS AVE  
City-St-Zip: MELBOURNE, FL 32935

I hereby 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 all other like empowered.

SIGNATURE: LINDA N PRICE

TD

02/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date