## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 707941**

FILED Jan 16, 2007 Secretary of State

Entity Name: THE FIRST UNITED METHODIST CHURCH OF NICEVILLE, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

214 PARTIN DRIVE SOUTH NICEVILLE, FL 32578 US

Current Mailing Address: New Mailing Address:

214 PARTIN DRIVE SOUTH NICEVILLE, FL 32578

FEI Number: 59-6495957 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:

PEARSON, BLANE 214 SOUTH PARTIN DRIVE NICEVILLE, FL 32578 US

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:

itle: S () Delete Title: S (X) Change () Addition

 Name:
 HALL, STEVE
 Name:
 BAIRD, OCIE

 Address:
 110 SUNSET CURVE
 Address:
 1040 STEPHEN DRIVE

 City-St-Zip:
 NICEVILLE, FL 32578
 City-St-Zip:
 NICEVILLE, FL 32578

Title: PD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SPENCE, JERRY
 Name:

 Address:
 34 SOUTHVIEW AVE
 Address:

 City-St-Zip:
 VALPARAISO, FL 32580
 City-St-Zip:

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

 Name:
 BORLAND, NANETTE
 Name:
 HUFF, BRANDON

 Address:
 640 KILCULLEN DRIVE
 Address:
 604 SAILBOAT DRIVE

 City-St-Zip:
 NICEVILLE, FL 32578
 City-St-Zip:
 NICEVILLE, FL 32578

Title: D ( ) Delete Title: T (X) Change ( ) Addition Name: SHEFFIELD, BOB Name: PEARSON, BLANE

Name:SHEFFIELD, BOBName:PEARSON, BLANEAddress:1211 WHITEWOOD WAYAddress:2781 WILLOW BEND COURTCity-St-Zip:NICEVILLE, FL 32578City-St-Zip:CRESTVIEW, FL 32578

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: BLANE PEARSON T 01/16/2007