

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709996

FILED
Mar 06, 2008
Secretary of State

Entity Name: PARKER UNITED METHODIST CHURCH INC.

Current Principal Place of Business:

CORNER OF BOAT RACE RD&HWY 98
908 TYNDALL PKWY
PANAMA CITY, FL 32404 US

New Principal Place of Business:

Current Mailing Address:

CORNER OF BOAT RACE RD&HWY 98
908 TYNDALL PKWY
PANAMA CITY, FL 32404 US

New Mailing Address:

FEI Number: 59-1118895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FULFORD, JIM
102 ROYAL CIRCLE
PANAMA CITY, FL 32404 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: D () Delete
Name: FULFORD, JIM
Address: 102 ROYAL CIRCLE
City-St-Zip: PANAMA CITY, FL 32404

Title: T () Delete
Name: FOX, CHARLES
Address: 811 SOUTH HIGHLINE DR
City-St-Zip: PANAMA CITY, FL 324048237

Title: O () Delete
Name: ANSLOW, JANE
Address: 1710 RETT PLACE
City-St-Zip: LYNN HAVEN, FL 32444

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: T () Change (X) Addition
Name: MCCOY, ROBERT
Address: 5324 ELLA STREET
City-St-Zip: PANAMA CITY, FL 32404-630

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: JIM FULFORD

D

03/06/2008

Electronic Signature of Signing Officer or Director

Date