

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2008 08:00 A
Secretary of State

DOCUMENT # 710007	
1. Entity Name THE UNION STREET UNITED METHODIST CHURCH, INC.	
Principal Place of Business 1625 UNION STREET CLEARWATER, FL 33755	Mailing Address 1625 UNION STREET CLEARWATER, FL 33755



01092008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-6072704	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**JAQUETH, CHARLES A
1900 PINEHURST DR
CLEARWATER, FL 33763**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORGAN, JAMES M P 1684 PINE PLACE CLEARWATER, FL 33755
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAQUETH, CHARLES 1900 PINEHURST DRIVE CLEARWATER, FL 33763
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STACEY, MARION 847 CAMBRIDGE CT. DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUBBS, WARREN 1001 EGRET COURT DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ABSHEAR, GERALDINE 1485 HALSEY DRIVE, APT 206 DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/14/08-80003-013 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address; with all other like empowered.

SIGNATURE: *Charles A. Jaqueth*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-08

Date

727-733-6135

Daytime Phone #