2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710007

FILED Apr 29, 2009 Secretary of State

Entity Name: THE UNION STREET UNITED METHODIST CHURCH, INC.

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

1625 UNION STREET CLEARWATER, FL 33755

Current Mailing Address: New Mailing Address:

1625 UNION STREET CLEARWATER, FL 33755

FEI Number: 59-6072704 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:

JAQUETH, CHARLES A

1900 PINEHURST DR

CLEARWATER, FL 33763 US

JOHN, BRENNEMAN

1562 SOUVENIR DRIVE

CLEARWATER, FL 33755 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: JOHN BRENNEMAN 04/29/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MORGAN, JAMES M P CRISLER, MORRIS Name: Name: 1684 PINE PLACE Address: 1863 SHARONDALE Address: City-St-Zip: CLEARWATER, FL 33755 City-St-Zip: CLEARWATER, FL 33755 Title: () Delete Title: (X) Change () Addition JAQUETH, CHARLES Name: MAYEUX, NANCY Name: Address: 1900 PINEHURST DRIVE Address: 1625 UNION STREET City-St-Zip: CLEARWATER, FL 33763 City-St-Zip: CLEARWATER, FL 33755 Title: () Delete Title: () Change () Addition STACEY, MARION Name: Name: 847 CAMBRIDGE CT. Address: Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 HUBBS, WARREN
 Name:

 Address:
 1001 EGRET COURT
 Address:

 City-St-Zip:
 DUNEDIN, FL 34698
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 ABSHEAR, GERALDINE
 Name:

 Address:
 1485 HALSEY DRIVE, APT 206
 Address:

 City-St-Zip:
 DUNEDIN, FL 34698
 City-St-Zip:

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: NANCY MAYEUX REV 04/29/2009