

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710190

FILED
Feb 22, 2010
Secretary of State

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

Current Principal Place of Business:

MOORES LAKE RD AND METHODIST CHURCH RD
3310 MOORES LAKE RD.
DOVER, FL 33527

New Principal Place of Business:

Current Mailing Address:

MOORES LAKE RD AND METHODIST CHURCH RD
P O BOX 14
DOVER, FL 33527 US

New Mailing Address:

FEI Number: 59-2876019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALE, DAVID
3422 DOUBLE JACK PLACE
DOVER, FL 33527 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
Name: DROWNS, MARILYNN
Address: 3342 MOTT RD
City-St-Zip: DOVER, FL 33527

Title: T
Name: SUMNER, BETTY
Address: 5628 PINE ST
City-St-Zip: SEFFNER, FL 33584

Title: TD
Name: GRANT, DAVID
Address: 2504 OAKHILL PARK PLACE
City-St-Zip: VALRICO, FL 33594

Title: D
Name: GALE, DAVID
Address: 3422 DOUBLE JACK PL
City-St-Zip: DOVER, FL 33527

Title: T
Name: MACDONALD, WILLIAM
Address: PO BOX 446 N/A
City-St-Zip: VALRICO, FL 33595

Title: T
Name: PASS, CAMILLA M
Address: P O BOX 327
City-St-Zip: SYDNEY, FL 33587

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: MARILYNN DROWNS

D

02/22/2010

Electronic Signature of Signing Officer or Director

Date