

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710482

FILED
Feb 26, 2009
Secretary of State

Entity Name: ST. MARK'S UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

2030 N. HWY. A-1-A
INDIALANTIC, FL 32903

New Principal Place of Business:

Current Mailing Address:

2030 N. HWY. A-1-A
INDIALANTIC, FL 32903

New Mailing Address:

FEI Number: 59-0979084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA CONFERENCE
1140 E. MCDONALD ST, UNITED METHODIST CHURCH
LAKELAND, FL 33802 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: TR () Delete
Name: MARTIN, BERT
Address: 106 FREDDIE ST
City-St-Zip: SATELLITE BEACH, FL 32937

Title: TR () Delete
Name: KNIGHT, SHERRIE
Address: 408 BRIDGETOWN CT
City-St-Zip: SATELLITE BEACH, FL 32937

Title: TR () Delete
Name: WILLIAMS, RON
Address: 240 ALLAN LN
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: TR () Delete
Name: ROBERT, DEAN
Address: 197 ATLANTIC
City-St-Zip: INDIALANTIC, FL 32903

Title: TR () Delete
Name: CONDRY, BOB
Address: 471 SEAHORSE AVE
City-St-Zip: INDIALANTIC, FL 32903

Title: C () Delete
Name: JEFFREY, LAURIE
Address: 473 RIO CASA DRIVE N
City-St-Zip: INDIALANTIC, FL 32903

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TR (X) Change () Addition
Name: MCKINNEY, DAVID
Address: 5055 NE DIXIE HWY #B202
City-St-Zip: PALM BAY, FL 32905

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: ROBERT DEAN

TR

02/26/2009

Electronic Signature of Signing Officer or Director

Date