

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711012

FILED
Jan 17, 2009
Secretary of State

Entity Name: PENSACOLA DISTRICT BOARD OF METHODIST MISSIONS, INC.

Current Principal Place of Business:

PO BOX 2727
PENSACOLA, FL 325032727 US

New Principal Place of Business:

610 BRIAN CIRCLE
MARY ESTHER, FL 32569 US

Current Mailing Address:

2245 MCCUTCHEN PLACE
PENSACOLA, FL 32503 US

New Mailing Address:

610 BRIAN CIRCLE
MARY ESTHER, FL 32569 US

FEI Number: 23-7178321

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEHMAN, DONALD A.
2245 MCCUTCHEN PLACE
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

DUANE J. KECK
610 BRIAN CIRCLE
MARY ESTHER, FL 32569 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: DUANE J. KECK

01/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEHMAN, DONALD A.
Address: 3245 MCCUTCHEN PLACE
City-St-Zip: PENSACOLA, FL

Title: TD () Delete
Name: OLIVER, MAVIS,
Address: RT. 11 BOX 346
City-St-Zip: PENSACOLA, FL

Title: D () Delete
Name: SHARP, OWEN
Address: 3161 LEESBURG SQUARE
City-St-Zip: PENSACOLA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KECK, DUANE J.
Address: 610 BRIAN CIRCLE
City-St-Zip: MARY ESTHER, FL 32569 US

Title: TD (X) Change () Addition
Name: BRUNER, AL,
Address: 2135 HALLMARK DR.
City-St-Zip: PENSACOLA, FL 32503 US

Title: () Change () Addition
Name:
Address:
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: DUANE J. KECK

PD

01/17/2009

Electronic Signature of Signing Officer or Director

Date