2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#711264

FILED Jan 26, 2006 Secretary of State

Entity Name: FLORIDA CITY METHODIST CHURCH, INC.

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

145 S.W. 5 AVENUE 145 S.W. 5 AVENUE

FLORIDA CITY, FL 33034 FLORIDA CITY, FL 33034 US

Current Mailing Address: New Mailing Address:

P.O BOX 343235 P.O BOX 343235

FLORIDA CITY, FL 33034 US FLORIDA CITY, FL 330343235 US

FEI Number: 59-6197614 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:

TORRES, RAYMUNDO 145 S.W. 5 AVE FLORIDA CITY, FL 33034 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:

Cleater in Circumstance of Devictors of American

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. () Delete Title: MRS. (X) Change () Addition Name: TORRES, RAYMUNDO Name: VEGA, MARIA

Address: 145 S.W. 5 AVE Address: 16345 SW 303 ST

City-St-Zip: FLORIDA CITY, FL 33034 City-St-Zip: HOMESTEAD, FL 33033

Title: MS. () Delete Title: MR. (X) Change () Addition

Name: DEMPSEY, BARBARA Name: TORRES, RAYMUNDO

Address: 829 SW 2ND STREET Address: 327 NW 2 ST

City-St-Zip: FLORIDA CITY, FL 33034 City-St-Zip: FLORIDA CITY, FL 33034

Title: MR. () Delete Title: MR. (X) Change () Addition

 Name:
 DACEUS, JEAN
 Name:
 DACEUS, JEAN

 Address:
 145 S.W. 5 AVE
 Address:
 405 SW 5 AVE

City-St-Zip: FLORIDA CITY, FL 33034 City-St-Zip: FLORIDA CITY, FL 33034

Title: () Delete Title: MRS () Change (X) Addition

 Name:
 Name:
 JILL, DACEUS

 Address:
 Address:
 405 SW 5 AVE

City-St-Zip: City-St-Zip: FLORIDA CITY, FL 33034

I hereby certify that the information supplied with this filing does not qualify for the 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: RAYMUNDO TORRES MR. 01/26/2006