

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711777

FILED
Jun 25, 2009
Secretary of State

Entity Name: FIRST METHODIST CHURCH OF CHIPLEY, INC.

Current Principal Place of Business:

1285 JACKSON AVE
CHIPLEY, FL 32428 US

New Principal Place of Business:

Current Mailing Address:

1285 JACKSON AVE
CHIPLEY, FL 32428 US

New Mailing Address:

FEI Number: 59-1163780 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CLARK, ALLEN MR
1645 PEEL AVE
CHIPLEY, FL 32428 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 () Delete
Name: MCCRARY, RUTH
Address: P.O. BOX 534
City-St-Zip: CHIPLEY, FL 32428

Title: D () Delete
Name: MERRITT, GRADY
Address: 3564 WESTBROOK DRIVE
City-St-Zip: CHIPLEY, FL 32428

Title: P () Delete
Name: MCDANIEL, HULON
Address: 625 SECOND STREET
City-St-Zip: CHIPLEY, FL 32428

Title: D () Delete
Name: NEWSOM, JIM
Address: 2699 BRUNER DAIRY ROAD
City-St-Zip: VERNON, FL 32462

Title: D () Delete
Name: STALLINGS, JIMMY
Address: 842 HUTCHISON ROAD
City-St-Zip: CHIPLEY, FL 32428

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:

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: C. BRANDY ELLIS, CPA

CPA

06/25/2009

Electronic Signature of Signing Officer or Director

_____ Date