

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712319

FILED
Mar 26, 2009
Secretary of State

Entity Name: PALM BAY UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

2100 PORT MALABAR BLV NE
PALM BAY, FL 32905

New Principal Place of Business:

Current Mailing Address:

2100 PORT MALABAR BLV NE
PALM BAY, FL 32905

New Mailing Address:

FEI Number: 59-1310615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARREIRO, JANET
2100 PORT MALABAR BLVD NE
PALM BAY, FL 32905 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: P () Delete
Name: DOWNS, PATRICIA
Address: 2796 RODEO DR
City-St-Zip: PALM BAY, FL 32905

Title: C () Delete
Name: CASSEL, LESTER
Address: 2074 MATTISON DRIVE NE
City-St-Zip: PALM BAY, FL 32905

Title: D () Delete
Name: REICHARD, MARJORIE
Address: 1407 CINDY CIRCLE NE
City-St-Zip: PALM BAY, FL 32905

Title: S () Delete
Name: FOWLE, DORIS
Address: 454 COLLEN AVE
City-St-Zip: PALM BAY, FL 32908

Title: D () Delete
Name: OLIVER, JESSE
Address: 1331 ATHEUS DR
City-St-Zip: PALM BAY, FL 32905

Title: T () Delete
Name: CARREIRO, JANET
Address: 998 EASTLAKE STREET NE
City-St-Zip: PALM BAY, FL 32909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LESLIE, ERROL E
Address: 2796 RODEO DR
City-St-Zip: PALM BAY, FL 32905

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: JANET CARREIRO

TREA

03/26/2009

Electronic Signature of Signing Officer or Director

Date