2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# 714263

Entity Name: THE FIRST UNITED METHODIST CHURCH OF DELTONA, INCORPORATED

Current Principal Place of Business:

1045 E. NORMANDY BLVD.
DELTONA, FL 32725

New Principal Place of Business:

Current Mailing Address:

1045 E. NORMANDY BLVD.
DELTONA, FL 32725

New Mailing Address:

FEI Number: 59-1308695 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCLEAN, NANCY
101 GRAND PLAZA DR Q6
ORANGE CITY, FL 32763 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:	DC	( ) Delete
Name:	STARK, DENNIS M	
Address:	1907 OLDHAM DRIVE	
City-St-Zip:	DELTONA, FL 32738	
Title:	D	( ) Delete
Name:	HEAPS, HELEN	
Address:	1152 TIVOLI DRIVE	
City-St-Zip:	DELTONA, FL 32725	
Title:	D	( ) Delete
Name:	CRAPAROTTA, DIANE	
Address:	768 BRIARCLIFF DR	
City-St-Zip:	ORANGE CITY, FL 32763	
Title:	D	( ) Delete
Name:	PORTER, FRANCES	
Address:	1050 N GAUCHO CIRCLE	
City-St-Zip:	DELTONA, FL 32725	
Title:	TR	( ) Delete
Name:	JEFFRIES, HOWARD	
Address:	2170 OLD TRAIN ROAD	
City-St-Zip:	DELTONA, FL 32738	
Title:	T	( ) Delete
Name:	MCLEAN, NANCY	
Address:	101 GRAND PLAZA DR Q6	
City-St-Zip:	ORANGE CITY, FL 32763	

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:	( ) 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: DENNIS M STARK DC 04/14/2009

Electronic Signature of Signing Officer or Director — Date