

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714797

FILED
May 06, 2004
Secretary of State**Entity Name:** FIRST UNITED METHODIST CHURCH OF ORMOND BEACH, INC.**Current Principal Place of Business:**FIRST UNITED METHODIST CHURCH
336 SOUTH HALIFAX DRIVE
ORMOND BEACH, FL 32176**New Principal Place of Business:****Current Mailing Address:**ORMOND BEACH INC
336 SOUTH HALIFAX DRIVE
ORMOND BEACH, FL 321768111**New Mailing Address:****FEI Number:** 59-0782455**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GRELLE, BARBARA
17 DOLPHIN AVE
ORMOND BEACH, FL 32176 US**Name and Address of New Registered Agent:**GRELLE, BARBARA
6 SUGARBERRY CIRCLE
ORMOND BEACH, FL 32174 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: _____

05/06/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** CTR () Delete
Name: PAUL, RICHARD L
Address: 31 COQUINA RIDGE WAY
City-St-Zip: ORMOND BEACH, FL 321741810**Title:** VTR () Delete
Name: GLASS, THOMAS G
Address: 24 FOXFORDS CHASE
City-St-Zip: ORMOND BEACH, FL 321742427**Title:** TR () Delete
Name: VELIE, SARA
Address: 200 OAK GROVE STREET
City-St-Zip: ORMOND BEACH, FL 321765731**Title:** T () Delete
Name: JOHNSON, ROBERT L.
Address: 9 ROCKY CREEK TRAIL
City-St-Zip: ORMOND BCH, FL**Title:** TR () Delete
Name: CARTLEDGE, LESBETH
Address: 417 N BEACH STREET
City-St-Zip: ORMOND BEACH, FL 321745302**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** CTR (X) Change () Addition
Name: DETTER, RICHARD D
Address: 9 KATRINAS DRIVE
City-St-Zip: ORMOND BEACH, FL 321749111**Title:** TR (X) Change () Addition
Name: GLASS, THOMAS G
Address: 24 FOXFORDS CHASE
City-St-Zip: ORMOND BEACH, FL 321742427**Title:** STR (X) Change () Addition
Name: EBBETS, REBECCA
Address: 18 LOST CREEK LANE
City-St-Zip: ORMOND BEACH, FL 321744840**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VCTR (X) Change () Addition
Name: CARTLEDGE, LESBETH
Address: 417 N BEACH STREET
City-St-Zip: ORMOND BEACH, FL 321745302

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD D DETTER

CTR

05/06/2004

Electronic Signature of Signing Officer or Director

Date