

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714991

FILED
Apr 15, 2009
Secretary of State

Entity Name: UNITED METHODIST RETIREMENT CENTER OF TAMPA, INC.

Current Principal Place of Business:

400 E. HARRISON ST
TAMPA, FL 336023444 US

New Principal Place of Business:

Current Mailing Address:

400 E. HARRISON ST
TAMPA, FL 336023444 US

New Mailing Address:

FEI Number: 59-1229023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORP DIRECT AGENTS INC
515 E. PARK AVE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

WARE, JIM
4100 W KENNEDY BLVD #130
TAMPA, FL 33609 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: JIM WARE

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WARE, JIM
Address: 4731 W. VASCONIA STREET
City-St-Zip: TAMPA, FL 33629 US

Title: D () Delete
Name: BROCK, RUTH
Address: 2329 MERRILY CIRCLE
City-St-Zip: SEFFNER, FL 33584 US

Title: VP () Delete
Name: BEERY, DAVID
Address: 7109 DUCAN AVE
City-St-Zip: TAMPA, FL 33604 US

Title: D () Delete
Name: CAPITANO, MARY
Address: 12401 NORTH 22ND ST. #B101
City-St-Zip: TAMPA, FL 33612 US

Title: D () Delete
Name: SHEPPARD, DORIS
Address: 400 E. HARRISON STREET
City-St-Zip: TAMPA, FL 33602 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WARE, JIM
Address: 4100 W. KENNEDY BLVD #130
City-St-Zip: TAMPA, FL 33609 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PELAEZ, ROBERT
Address: 4009 NORTH RIVER VIEW AVE
City-St-Zip: TAMPA, FL 336071052

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: IBARRA, REINA
Address: 215 W GRAND CENTRAL AVE
City-St-Zip: TAMPA, FL 33606

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: JIM WARE

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date