

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716298

FILED  
Mar 22, 2007  
Secretary of State

Entity Name: UNITED METHODIST CHURCH OF PINE ISLAND, INC.

**Current Principal Place of Business:**

5701 PINE ISLAND RD.  
BOKEELIA, FL 33922

**New Principal Place of Business:**

**Current Mailing Address:**

5701 PINE ISLAND RD.  
BOKEELIA, FL 33922

**New Mailing Address:**

FEI Number: 59-1773457

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MADDOCK, ROY  
11941 OAKLAND DR  
BOKEELIA, FL 33922 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: DAVIS, RICHARD  
Address: 10691 HABITAT TRAIL  
City-St-Zip: BOKEELIA, FL 33922

Title: T ( ) Delete  
Name: MARINO, WILLIAM A  
Address: 1400 N.W. 2ND ST.  
City-St-Zip: CAPE CORAL, FL 33956

Title: C ( ) Delete  
Name: GRAVES, RON  
Address: 6030 KEY LARGO CIRCLE  
City-St-Zip: PUNTA GORDA, FL 33955

Title: C ( ) Delete  
Name: LAPPIN, AL  
Address: 3823 DEWBERRY LANE  
City-St-Zip: SAINT JAMES CITY, FL 33956

Title: S ( ) Delete  
Name: RUTH, ANDERSON  
Address: 5890 LULOMA LANE  
City-St-Zip: BOKEELIA, FL 33922

Title: C ( ) Delete  
Name: STEVENS, DAN  
Address: P.O. BOX 564  
City-St-Zip: ST. JAMES CITY, FL 33956

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: C (X) Change ( ) Addition  
Name: MONTGOMERY, ROBERT  
Address: 7858 BREAKWATER CT.  
City-St-Zip: BOKEELIA, FL 33922

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 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: WILLIAM A. MARINO

TREA

03/22/2007

Electronic Signature of Signing Officer or Director

Date