

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716736

FILED
Apr 16, 2009
Secretary of State

Entity Name: SEMINOLE HEIGHTS UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

6111 CENTRAL AVENUE
TAMPA, FL 336046709 US

New Principal Place of Business:

Current Mailing Address:

6111 CENTRAL AVENUE
TAMPA, FL 336046709 US

New Mailing Address:

FEI Number: 59-0657332 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, KENTON P MR
C/O SEMINOLE HGHTS UNITED METHODIST CHURCH
6111 CENTRAL AVENUE
TAMPA, FL 33604 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: TR () Delete
Name: PATRICK, MARIE MRS
Address: 8407 N. WILLOW
City-St-Zip: TAMPA, FL 33604

Title: TR () Delete
Name: GRUBER, RICHARD MR
Address: 10202 CLIFF CIRCLE
City-St-Zip: TAMPA, FL 33612

Title: TR () Delete
Name: MOORE, TOM MR.
Address: 4706 N. 10TH ST
City-St-Zip: TAMPA, FL 33603

Title: TR () Delete
Name: MESSER, LARRY MR
Address: 2108 W. FLORA ST.
City-St-Zip: TAMPA, FL 33604

Title: TR () Delete
Name: SODERBERG, KATHERINE MRS.
Address: 310 E. CLUSTER
City-St-Zip: TAMPA, FL 33604

Title: TR () Delete
Name: TOMPKINS, T J MR.
Address: 2013 E. IDLEWILD AVE
City-St-Zip: TAMPA, FL 33610

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TR (X) Change () Addition
Name: MOORE, THOMAS MR.
Address: 4706 N. 10TH ST
City-St-Zip: TAMPA, FL 33603

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

Title: TR (X) Change () Addition
Name: DUVALL, WILLIAM J MR.
Address: 5408 BRANCH AVE.
City-St-Zip: TAMPA, FL 33604

Title: TR (X) Change () Addition
Name: CAMP, GERALD B MR.
Address: 11719 N. EDISON
City-St-Zip: TAMPA, FL 33612

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: WILLIAM J. DUVALL

MR

04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date