

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716855

FILED
Mar 02, 2010
Secretary of State

Entity Name: SEMINOLE UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

5400 SEMINOLE BLVD
SEMINOLE, FL 33772 US

New Principal Place of Business:

Current Mailing Address:

5400 SEMINOLE BLVD
SEMINOLE, FL 33772 US

New Mailing Address:

FEI Number: 59-0760227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAINES, DUANE
10600 LAKE VISTA DRIVE
SEMINOLE, FL 33772 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: T
Name: KASTOR, KAREN
Address: 8628 111TH ST. N
City-St-Zip: SEMINOLE, FL 33772 US

Title: T
Name: JANE, MOHR
Address: 5925 TERRACE PARK DR. #211
City-St-Zip: ST. PETERSBURG,, FL 33709 US

Title: T
Name: PULFER, PETE
Address: 6007 137TH TERRACE N.
City-St-Zip: CLEARWATER,, FL 33760 US

Title: T
Name: MOHNEY, EUGENE
Address: 7886 LAKE VISTA DR.
City-St-Zip: SEMINOLE, FL 33772 US

Title: T
Name: GODFREY, ALLEN
Address: 9257 111TH ST. N.
City-St-Zip: SEMINOLE, FL 33772 US

Title: T
Name: ORR, SHIRLEY
Address: 11210 CHEROKEE DR.
City-St-Zip: ST. PETERSBURG,, FL 33708 US

I hereby 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 all other like empowered.

SIGNATURE: DUANE HAINES

PRES

03/02/2010

Electronic Signature of Signing Officer or Director

Date