

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718770

FILED  
Mar 02, 2009  
Secretary of State

**Entity Name:** MANHATTAN AVENUE UNITED METHODIST CHURCH OF TAMPA, FLORIDA, INCORPORATED

**Current Principal Place of Business:**

4511 S MANHATTAN AVE  
TAMPA, FL 33611

**New Principal Place of Business:**

**Current Mailing Address:**

4511 S MANHATTAN AVE  
TAMPA, FL 33611

**New Mailing Address:**

**FEI Number:** 59-0809626

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMAS, JEFFERY  
4511 S. MANHATTAN AVE  
TAMPA, FL 33611 US

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

THOMAS, JEFFERY D  
4511 S. MANHATTAN AVE  
TAMPA, FL 33611 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: REV. JEFFERY D. THOMAS, PASTOR  
Electronic Signature of Registered Agent

03/02/2009  
Date

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: NEILL, ROBERT  
Address: 4103 OAKELLAR  
City-St-Zip: TAMPA, FL 33611

Title: T ( ) Delete  
Name: CASON, GEORGE  
Address: 4405 FAIR OAKS AVE  
City-St-Zip: TAMPA, FL 33611

Title: T ( ) Delete  
Name: EVANS, GEORGE  
Address: 4404 LAWN AVE  
City-St-Zip: TAMPA, FL 33611

Title: T ( ) Delete  
Name: HOSSMAN, JACK  
Address: 5906 S HIMES AVE  
City-St-Zip: TAMPA, FL 33611

Title: T ( ) Delete  
Name: GILLEY, DEDRA  
Address: 7410 S. WESTSHORE BLVD  
City-St-Zip: TAMPA, FL 33616

Title: T ( ) Delete  
Name: CROCKETT, BETTY  
Address: 3616 ROGERS AVE  
City-St-Zip: TAMPA, FL 33611

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

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

Title: P (X) Change ( ) Addition  
Name: THOMAS, JEFFERY D  
Address: 4511 S. MANHATTAN AVE  
City-St-Zip: TAMPA, FL 33611

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

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 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: REV. JEFFERY D. THOMAS, PASTOR  
Electronic Signature of Signing Officer or Director

P  
03/02/2009  
Date