## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#721850**

FILED Jul 03, 2006 Secretary of State

Entity Name: THE FIRST UNITED METHODIST CHURCH OF SEBRING, FLORIDA

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
105 S.PINE AVE SEBRING, FL 33870 US			126 S PINE STREET SEBRING, FL 33870-364 US			
Current Mailing Address:			New Maili	New Mailing Address:		
105 S.PINE AVE SEBRING, FL 33870 US		126 S PINE STREET SEBRING, FL 33870-364 US				
n accordan		FEI Number Applied For() FEI 193(2)(b), F.S., the corporation did not recei F Current Registered Agent:	<del>-</del>			
IRVINE, DI 105 S. PIN SEBRING,	ELORES IE AVE FL 33870	US	IRVINE, D 126 S PINI SEBRING	•		
in the State of Florida. SIGNATURE: DOLORES J. IRVINE				07/03/2006		
		onic Signature of Registered Agent		Date		
OFFICERS	S AND DIRE	CTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	C RAPP, ROBE 2521 PINEW SEBRING, FI	OOD BLVD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	TD SPRINGER, 6312 MATAN SEBRING, FI	ZAS DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	S IRVINE, DOL 2682 S FLAN AVON PARK	/INGO RD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	JERNIGAN, \	VATER POINT DR.	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D METTAUER, 218 SWALLO SEBRING, FI	DW AVE	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition SMITH, LORRIE 218 SWALLOW AVE SEBRING, FL 33872		

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: JOANN L. SPRINGER T 07/03/2006