2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#722034

FILED Jun 17, 2009 Secretary of State

Entity Name: CHRIST UNITED METHODIST CHURCH OF MILTON, FLORIDA, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 5983 DOGWOOD ST MILTON, FL 32570 US **Current Mailing Address: New Mailing Address:** 5983 DOGWOOD ST MILTON, FL 32570 US FEI Number: 59-1926257 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CHAPMAN, ROBERT 5215 MORGAN RIDGE DRIVE MILTON, FL 32570 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BIGNER, RICHARD Name: Name: Address: 5608 ELIZABETH WAY Address: City-St-Zip: MILTON, FL 32570 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: CLARK, SUSAN Name: PERRY, COLETTE M Address: 5157 SPRINGDALE DRIVE Address: 5613 ELIZABETH WAY City-St-Zip: MILTON, FL 32570 City-St-Zip: MILTON, FL 32570 Title: () Delete Title: (X) Change () Addition SCHOENHERR, KAY CHAPMAN, ROBERT Name: Name: 5853 HAMILTON BRIDGE ROAD 5285 MORGAN RIDGE DR Address: Address: City-St-Zip: MILTON, FL 32570 City-St-Zip: MILTON, FL 32570 Title: (X) Delete Title: () Change () Addition Name: CHAPMAN, ROBERT Name: 5285 MORGAN RIDGE DR Address: Address: City-St-Zip: MILTON, FL 32570 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: COLETTE M. PERRY **TRES** 06/17/2009