2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#723143

FILED Feb 12, 2008 Secretary of State

Entity Name: ASBURY UNITED METHODIST CHURCH OF NEW PORT RICHEY, INC

Current Principal Place of Business: New Principal Place of Business: 4204 THYS RD NEW PORT RICHEY, FL 34653 **Current Mailing Address: New Mailing Address:** 4204 THYS RD NEW PORT RICHEY, FL 34653 FEI Number: 59-1502595 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HENRY, DALE JR 1206 SWEET JASMINE DR NEW PORT RICHEY, FL 34655 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete HENRY, DALE JR HENRY, DALE JR Name: Name: 1206 SWEET JASMINE DR Address: 1206 SWEET JASMINE DR Address: City-St-Zip: NEW PORT RICHEY, FL 34653 City-St-Zip: NEW PORT RICHEY, FL 34655 Title: () Delete Title: (X) Change () Addition BLEKKENK, JEAN Name: TUCKER, MARILYN Name: Address: 5340 CHARLOTTE AVE 204 Address: 7413 ROEBELLINI AVENUE City-St-Zip: NEW PORT RICHEY, FL 34652 US City-St-Zip: NEW PORT RICHEY, FL 34655 US Title: () Delete Title: () Change () Addition GRAVES, ELIZABETH Name: Name: Address: 7741 WAYBURY ST Address: City-St-Zip: NEW PORT RICHEY, FL 34653 City-St-Zip: Title: () Delete Title: D (X) Change () Addition GRIFFITH, KEITH Name: Name: BOALT, KEITH Address: 5043 SHERRY LANE Address: 4914 ECKNER STREET City-St-Zip: NEW PORT RICHEY, FL 34653 US City-St-Zip: NEW PORT RICHEY, FL 34652 US Title: () Delete Title: () Change () Addition PETTIT, LEON Name: Name: 3407 TEESIDE DRIVE Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34655 City-St-Zip: Title: () Delete Title: () Change () Addition ANDERSON, TED Name: Name: Address: 5417 LEEWARD LANE Address: NEW PORT RICHEY, FL 34652 City-St-Zip: 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: DALE HENRY, JR PRES 02/12/2008