

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724157

FILED  
Mar 09, 2010  
Secretary of State

**Entity Name:** FIRST UNITED METHODIST CHURCH OF CLEARWATER, INC.

**Current Principal Place of Business:**

411 TURNER STREET  
CLEARWATER, FL 33756

**New Principal Place of Business:**

**Current Mailing Address:**

411 TURNER STREET  
CLEARWATER, FL 33756

**New Mailing Address:**

**FEI Number:** 59-0747305

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEPHEN O. COLE RA  
625 COURT STREET SUITE 200  
CLEARWATER, FL 33756 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: CD  
Name: SEVER, JAMES  
Address: 1330 MORELAND #11  
City-St-Zip: CLEARWATER, FL 33764

Title: D  
Name: GRAHAM, MARTHA  
Address: 1336 HIGHFIELD  
City-St-Zip: CLEARWATER, FL 33764

Title: DV  
Name: ALLBRITTON, DAVID  
Address: 217 PALM ISLAND NW  
City-St-Zip: CLEARWATER, FL 33767

Title: D  
Name: CARLISE, DAN  
Address: 426 SAINT ANDREWS DR  
City-St-Zip: BELLEAIR, FL 33756

Title: D  
Name: HUGHES, DIANE  
Address: 2310 DUNCN DR  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: D  
Name: BOWERS, THOMAS  
Address: 827 VICTORIA  
City-St-Zip: DUNEDIN, FL 34698

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: JAMES SEVER

CD

03/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date