2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726087

FILED Feb 13, 2007 Secretary of State

Entity Name: THE FIRST UNITED METHODIST CHURCH OF APOPKA, INC.

Current Principal Place of Business: New Principal Place of Business: 201 SOUTH PARK AVE APOPKA, FL 32703 **Current Mailing Address: New Mailing Address:** 201 SOUTH PARK AVE APOPKA, FL 32703 FEI Number: 59-1258663 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: HUMPHREY, JACK JR 1140 MONTÉAGLE CIRCLE APOPKA, FL 32712 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 HUMPHREY, JACK JR Name: Name: 1140 MONTEAGLE CIRCLE Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: Title: Title: () Delete () Change () Addition DORSEY, RON Name: Name: Address: POB 654 Address: City-St-Zip: APOPKA, FL 32704 City-St-Zip: Title: () Delete Title: () Change () Addition FISHER, SHARON Name: Name: Address: 3402 MEECE AVENUE Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: BORES, DONALD Name: DAVIS, JACK 1724 STONEWOOD WAY Address: Address: 857 PALM OAK DRIVE City-St-Zip: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32712 Title: () Delete Title: (X) Change () Addition BEUSSE, JIM JR SAPONE, LEN Name: Name: 1030 WOODCRAFT DRIVE 1490 GLENMORE DRIVE Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32712 Title: () Delete Title: (X) Change () Addition BORNMANN, SUSAN AYERS, DUDLEY Name: Name: Address: 487 DREAM LAKE DR Address: 1716 LAKE MARION DRIVE APOPKA, FL 32712 APOPKA, FL 32712 City-St-Zip: City-St-Zip:

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: JACK HUMPHREY, JR. MR. 02/13/2007