2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2012
Secretary of State

DOCUMENT# 728191

Entity Name: NEW ST. PAUL FREE METHODIST CHURCH, INC.

Current Principal Place of Business:

19431 N.W. 100 AVE ROAD
MICANOPY, FL 32667 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 67
ORANGE LAKE, FL 32681 US

New Mailing Address:

FEI Number: 59-2954035 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, ALFRED W
18401 NW 53RD CT RD.
ORANGE LAKE, FL 32681 US

Name and Address of New Registered Agent:

WILSON, ALFRED W
18401 NW 53RD CT RD.
CITRA, FL 32113 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: ALFRED W WILSON 04/09/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CSD
Name: WILSON, ALFRED W
Address: 18401 NW 53RD CT RD
City-St-Zip: ORANGE LAKE, FL 32681

Title: TD
Name: AKINS, MARY P
Address: 19101 N.W. 100 AVE ROAD
City-St-Zip: MICANOPY, FL 32667

Title: D
Name: CHANDLER, EMMA
Address: 17637 N HWY 329
City-St-Zip: REDDICK, FL 32686 US

Title: S
Name: PERRY, GRACE
Address: 19101 NW 100TH AVE RD
City-St-Zip: MICANOPY, FL 32667

Title: P/D
Name: CHANDLER, LEROY S
Address: 17637 N HWY 329
City-St-Zip: REDDICK, FL 32686 US

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: ALFRED W WILSON CSD 04/09/2012
Electronic Signature of Signing Officer or Director Date