2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #732972

1. Entity Name
THE FIRST UNITED METHODIST CHURCH OF



FILED Feb 04, 2008 8:00 am Secretary of State 02-04-2008 90045 006 ****61.25

	LEE, INC.	CHOROH	<i>3</i> 1	13.00						
Principal Place of Business 303 N 9TH ST. IMMOKALEE, FL 34142 US Mailing Address 303 N 9TH ST. IMMOKALEE, FL 34142 US Mailing Address 103 N 9TH ST. 104 MMOKALEE, FL 33934				,			1 1 1 1 1 1 1 1 	TIFIK BIDII TIDI) 8 8/4 8 8 8 8	
2. Principal P	Place of Business - No P.O. Box #	3. Mailing	Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01162008 C	hg-NP	CR2E03	7 (12/06)		
City & State		City & State				4. FEI Number				
Zip	Country Zip		Country			5. Certificate of S	tatus Desired		\$8.75 Add	litional
	6. Name and Address of Curren	nt Registered /	Agent			7. Name and Add	ress of New R	egistered A	gent	
BENSON, PEGGY			Name							
709 NORT	FEGG1 FH 11TH STREET EE, FL 34142		Street Addr			ss (P.O. Box Number is Not Acceptable)				
				City	,			FL	Zip Code	
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	e named entity submits this statement tions of registered agent.	for the purpose	e of changing its req	gistered offic	ce or register	red agent, or both, in	the State of Fig	irida. Tam t	amiliar with,	and accept
	J									
SIGNATURE .										
	Signature, typed or printed name of registered agei	int and title it applica	ble. (NOTE: Re	egistered Agent s	signature required	d when reinstating)		DATE		
-	Filing Fee is \$61.25 Due by May 1, 2008	ent and title it applica	9. Election Campa Trust Fund Con	aign Financi		\$5.00 May Be Added to Fees		ake check	payable to	
10.	Filing Fee is \$61.25		9. Election Campa	aign Financi	ing	\$5.00 May Be	Flor	ake check ida Depart	ment of St	tate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE & Warford Teane K War ford
SIGNATURE AND TYPED OR PRINTED MANGES SIGNING OFFICER OR DIRECTOR