

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732972

FILED  
Jan 21, 2009  
Secretary of State

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

**Current Principal Place of Business:**

303 N 9TH ST.  
IMMOKALEE, FL 34142 US

**New Principal Place of Business:**

**Current Mailing Address:**

303 N 9TH ST.  
IMMOKALEE, FL 33934

**New Mailing Address:**

303 N 9TH ST.  
IMMOKALEE, FL 34142

FEI Number: 59-1963954

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BENSON, PEGGY  
709 NORTH 11TH STREET  
IMMOKALEE, FL 34142 US

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

WATERS, MERRITT  
709 NORTH 11TH STREET  
IMMOKALEE, FL 34142 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: MERRITT WATERS

01/21/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: WARFORD, JEANNE K  
Address: 303 N 9TH ST PO BOX 5123  
City-St-Zip: IMMOKALEE, FL 34143

Title: D ( ) Delete  
Name: CARUTHERS, MIKE  
Address: 2210 W IMMOKALEE DR  
City-St-Zip: IMMOKALEE, FL 34142

Title: SD ( ) Delete  
Name: WARDEN, JANICE  
Address: P.O. BOX 5234  
City-St-Zip: IMMOKALEE, FL 34143

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TD (X) Change ( ) Addition  
Name: WARFORD, JEANNE K  
Address: PO BOX 5123  
City-St-Zip: IMMOKALEE, FL 34143

Title: D (X) Change ( ) Addition  
Name: CARUTHERS, MIKE  
Address: P. O. BOX 698  
City-St-Zip: FELDA, FL 33930

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JEANNE K. WARFORD

TREA

01/21/2009

Electronic Signature of Signing Officer or Director

Date