

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734920

FILED  
Jan 23, 2009  
Secretary of State

Entity Name: CHRIST CHURCH UNITED METHODIST, INC.

**Current Principal Place of Business:**

4845 N.E. 25TH AVE.  
FT. LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

4845 N.E. 25TH AVE.  
FT. LAUDERDALE, FL 33308

**New Mailing Address:**

FEI Number: 59-0931259      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

HERMAN, BRUCE ESQ.  
1401 EAST BROWARD BLVD.  
STE 206  
FT LAUDERDALE, FL 33301 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: STTR ( ) Delete  
Name: FRAZIER, ROBERT W ESQ  
Address: 6550 NORTH FEDERAL HWY., SUITE #220  
City-St-Zip: FT LAUDERDALE, FL 33308

Title: PTR ( ) Delete  
Name: KUNKEL, JAMES E  
Address: 6561 NE 20 AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: VTR ( ) Delete  
Name: DAVIS, DEAN E  
Address: 511 BAYSHORE DRIVE #606  
City-St-Zip: FORT LAUDERDALE, FL 33304

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAMES E KUNKEL

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

PTR

01/23/2009

\_\_\_\_\_  
Date