

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738433

FILED
Jan 13, 2009
Secretary of State

Entity Name: HERITAGE UNITED METHODIST CHURCH AT COUNTRYSIDE, INC.

Current Principal Place of Business:

2680 LANDMARK DR
CLEARWATER, FL 33761 US

New Principal Place of Business:

Current Mailing Address:

2680 LANDMARK DR
CLEARWATER, FL 33761 US

New Mailing Address:

FEI Number: 59-1758141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSTON, ARCHIE L
1507 RIVERDALE DR.
OLDSMAR, FL 34677 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: CD () Delete
Name: BURROUGHS, PAUL
Address: 2861 SABER DR.
City-St-Zip: CLEARWATER, FL 33759

Title: VD () Delete
Name: BARAN, THOMAS
Address: 22 BISHOP CREEK DR.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D () Delete
Name: JONES, DANNY
Address: 10557 GREENSPRINGS DR.
City-St-Zip: TAMPA, FL 33626

Title: S () Delete
Name: AMANDA, BECKER
Address: 4890 CROSS POINTE DR.
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: SANTA, MARIA
Address: 2119 ELM ST.
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: LINDBERG, SALLY
Address: 22 BISHOP CREEK DR.
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: FLOEN, JULIE
Address: 4210 SALTWATER BLVD
City-St-Zip: TAMPA, FL 33615

Title: D (X) Change () Addition
Name: BARAN, THOMAS
Address: 22 BISHOP CREEK DR
City-St-Zip: SAFETY HARBOR, FL 34695

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: ARCHIE L. JOHNSTON

RA

01/13/2009

Electronic Signature of Signing Officer or Director

Date