## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 743071** 

FILED Feb 02, 2005 Secretary of State

Entity Name: COMMUNITY UNITED METHODIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

3114 OKEECHOBEE ROAD FT. PIERCE, FL 34947 US

Current Mailing Address: New Mailing Address:

3114 OKEECHOBEE RD. FT. PIERCE, FL 34947

FEI Number: 59-1233481 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BRITTIAN, MARY ANN SURFACE, RICK 213 GARDENIA AVE. SURFACE, RICK 1108 SOUTH 8TH ST.

FORT PIERCE, FL 34982 US FORT PIERCE, FL 464-8526 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: RICK SURFACE 02/02/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition SHAW, STEVE KYER, ED Name: Name: P.O. BOX 12481 Address: 5589 NW SCEPTER DR. Address: City-St-Zip: FORT PIERCE, FL 34979 City-St-Zip: PORT ST. LUCIE, FL 34983 Title: () Delete Title: (X) Change ( ) Addition KRAMER, CLEMENS Name: KEYS, ORIN Name: Address: 2702 ATLANTIC AVE Address: 357 BAYSINGER AVE. City-St-Zip: FORT PIERCE, FL 34950 City-St-Zip: FORT PIERCE, FL 34982

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 VAN GOETHEM, DWAIN
 Name:

 Address:
 5192 NW EVER RD.
 Address:

 City-St-Zip:
 PORT ST. LUCIE, FL 34983
 City-St-Zip:

Title: T ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 KEYS, ORIN
 Name:
 MAXFIELD, BENNIE

 Address:
 357 BAYSINGER AVE.
 Address:
 3900 MILLISA TERR.

 City-St-Zip:
 FORT PIERCE, FL 34982
 City-St-Zip:
 FORT PIERCE, FL 34947

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SMITH, RICK
 Name:

 Address:
 5706 NW MACEDO
 Address:

 City-St-Zip:
 PORT ST. LUCIE, FL 34983
 City-St-Zip:

Title: ( ) Delete Title: T ( ) Change (X) Addition

 Name:
 Name:
 ROSBURY, ROBERT

 Address:
 Address:
 2828 IROQUOIS AVE.

 City-St-Zip:
 City-St-Zip:
 FORT PIERCE, FL 34946

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICK SURFACE P 02/02/2005