

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743205

FILED
Jan 21, 2009
Secretary of State

Entity Name: MEMORIAL UNITED METHODIST CHURCH OF LAKE PLACID, INC.

Current Principal Place of Business:

500 KENT AVE.
LAKE PLACID, FL 33852

New Principal Place of Business:

Current Mailing Address:

500 KENT AVE.
LAKE PLACID, FL 33852

New Mailing Address:

FEI Number: 59-2244760

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KOUKOS, JENNIFER T
10 MEADOWLAKE DR
LAKE PLACID, FL 33852 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: PD () Delete
Name: CAUSEY, JOHN,
Address: 108 LK JUNE RD
City-St-Zip: LAKE PLACID, FL

Title: D () Delete
Name: DURRANCE, DAN,
Address: 1125 PEACHTREE DR
City-St-Zip: LAKE PLACID, FL

Title: T () Delete
Name: STALLS, SONNY,
Address: 296 E LAKE PEARL DR
City-St-Zip: LAKE PLACID, FL 33852

Title: V () Delete
Name: RIDER, MIKE
Address: 45 MEADOWLAKE CIR S
City-St-Zip: LAKE PLACID, FL 33852

Title: D () Delete
Name: ESCOBAR, OMAR
Address: 1221 LANE CLAY DRIVE
City-St-Zip: LAKE PLACID, FL 33852

Title: S () Delete
Name: REYNOLDS, C, L, SR,
Address: 521 LAKE FRANCIS RD
City-St-Zip: LAKE PLACID, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAUSEY, JOHN
Address: 108 LK JUNE RD
City-St-Zip: LAKE PLACID, FL

Title: D (X) Change () Addition
Name: DURRANCE, DAN
Address: 1125 PEACHTREE DR
City-St-Zip: LAKE PLACID, FL

Title: T (X) Change () Addition
Name: STALLS, SONNY
Address: 296 E LAKE PEARL DR
City-St-Zip: LAKE PLACID, FL 33852

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

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

Title: S (X) Change () Addition
Name: REYNOLDS, C L SR.
Address: 521 LAKE FRANCIS RD
City-St-Zip: LAKE PLACID, FL

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: JOHN CAUSEY

PD

01/21/2009

Electronic Signature of Signing Officer or Director

Date