

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 744730

**FILED**  
**Feb 04, 2011**  
**Secretary of State**

**Entity Name:** DESTIN UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

200 BEACH DRIVE  
P. O. BOX 39  
DESTIN, FL 32540

**New Principal Place of Business:**

**Current Mailing Address:**

200 BEACH DRIVE  
P. O. BOX 39  
DESTIN, FL 32540

**New Mailing Address:**

**FEI Number:** 59-1482866

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHARRON, THOMAS H  
727 VINTAGE CIRCLE  
DESTIN, FL 32541 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: T  
Name: WASSEL, JIM  
Address: 4037 INDIAN TRAIL  
City-St-Zip: DESTIN, FL 32541

Title: TP  
Name: DOKKEN, DAVID  
Address: 431 CAPTAINS CIR.  
City-St-Zip: DESTIN, FL 32541

Title: T  
Name: GREG, OSWALT  
Address: 780 SHORE DRIVE  
City-St-Zip: DESTIN, FL 32550

Title: T  
Name: HUDSON, AMES  
Address: 126 INDIAN BAYOU DR  
City-St-Zip: DESTIN, FL 32541

Title: T  
Name: HENSLEY, TERRI  
Address: 4391 OLD BAYOU TRAIL  
City-St-Zip: DESTIN, FL 32541

Title: M  
Name: SHARRON, THOMAS H  
Address: 727 VINTAGE CIRCLE  
City-St-Zip: DESTIN, FL 32541

I hereby 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 all other like empowered.

SIGNATURE: THOMAS H. SHARRON

REV

02/04/2011

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

\_\_\_\_\_  
Date