2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008
Secretary of State

DOCUMENT# 748459

Entity Name: TOMOKA UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

1000 OLD TOMOKA ROAD
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

1000 OLD TOMOKA ROAD
ORMOND BEACH, FL 32174

New Mailing Address:

1000 OLD TOMOKA ROAD
ORMOND BEACH, FL 32174 US

FEI Number: 59-2406275 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAILHOT, JOHN R
1000 OLD TOMOKA ROAD
ORMOND BEACH, FL 32174 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 ( ) Delete
Name: MAILHOT, JOHN
Address: 43 WATERBLUFF DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: C ( ) Delete
Name: STRIPPE, MALCOLM A
Address: 42 SPRING MEADOWS DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: S ( ) Delete
Name: NEWBY, SHARON
Address: 1000 OLD TOMOKA ROAD
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition
Name: MONROE, THOMAS
Address: 1 SHERWOOD DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: C (X) Change ( ) Addition
Name: DRAPER, ROBERT A
Address: 106 HORSESHOE FALLS DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: S (X) Change ( ) Addition
Name: KNOWLES, MARILYNN
Address: 1000 OLD TOMOKA ROAD
City-St-Zip: ORMOND BEACH, FL 32174

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: THOMAS MONROE T 01/28/2008

Electronic Signature of Signing Officer or Director — Date