2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 05, 2008 8:00 am Secretary of State

DOCUMENT # 749037 1. Entity Name FOREST HILLS UNITED METHODIST CHURCH, INC.				03-05-2008 90025 049 ****70.00		
Principal Place 31350 CR 42 DELAND, FL	2	Mailing Address 31350 CR 42 DELAND, FL 32720 L	JS .			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02062008 Chg-NP CR2E037 (12/06)		
City & State		City & State		4. FEI Number Applied For 59-0217165 Not Applied	_	
Zip	Country	Zip	Country	5. Certificate of Status Desired Status Desired 5. Sertificate of		
	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Registered Agent		
BYRD, EDD 43113 BEAR LAKE BLVD DELAND, FL 32720				Street Address (P.O. Box Number is Not Acceptable)		
	€ 59 41					
		1	City	FL Zip Code		
8. 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. I am familiar with, and accepted agent. SIGNATURE Signature, typed or printed named registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Dyfte						
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Co	-	\$5.00 May Be Added to Fees Make check payable to Florida Department of State	•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRANKLIN, DENNIS 43941 GRACE AVE DELAND, FL 32720	RECTORS Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Addi	ition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC BYRD, EDD 43113 BEAR LAKE BLVD DELAND, FL 32720	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addi	ition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, TED 23040 E FOREST PAISLEY, FL 32767	∑ Delete	NAME STREET ADDRESS CITY-ST-ZIP	Ackerson, J. m 1 40824 County Road Eustis, FL 32730	ition	
THILE NAME STREET ADDRESS CITY-ST-ZIP	D RHYNEHART, LORRAINE 31512 SPRUCE ST GENEVA, FL 32732	→ Delete	STREET ADDRESS	D M Change Addi Ho SSPOULT, Winisted	ition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BYRD, NELLIE 43113 BEAR LAKE BLVD DELAND, FL 32720	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addi	ition	
NAME STREET ADDRESS CITY-ST-ZIP	D GAYLORD, ALAN 849 PLEASANT ST LAKE HELEN, FL 32744	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addi	ition	

12. I hereby certify that the information supplied with this filing roos has qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE.

SIGNATURE AND TYPED OBJETINED NAME OF SIGNING OFFICER OR DIRECTOR

7/1/08 352/469-0