

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757670

FILED
Mar 31, 2009
Secretary of State

Entity Name: TUSKAWILLA UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

3925 RED BUG LAKE ROAD
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

3925 RED BUG LAKE ROAD
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 59-2056230

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHILDS, DONALD
570 KENTIA ROAD
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

CHILDS, DONALD
715 SENECA MEADOWS ROAD
WINTER SPRINGS, FL 32708 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: DONALD R. CHILDS

03/31/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: GORMAN, WILLIAM
Address: 1498 WAUKON CIRCLE
City-St-Zip: CASSELBERRY, FL 32707

Title: T () Delete
Name: O'REILLY, LINDA
Address: 2283 WESTMINSTER TERR
City-St-Zip: OVIEDO, FL 32765

Title: T () Delete
Name: CHILDS, DONALD
Address: 570 KENTIA ROAD
City-St-Zip: CASSELBERRY, FL 32707

Title: T () Delete
Name: LUCANEGO, KITSY
Address: 907 WILLOW RD LANE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: CHILDS, DONALD
Address: 715 SENECA MEADOWS ROAD
City-St-Zip: WINTER SPRINGS, FL 32708

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

Title: T () Change (X) Addition
Name: JONES, WILLIAM
Address: 839 COPPERFIELD TERRACE
City-St-Zip: CASSELBERRY, FL 32707

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: DONALD R. CHILDS

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03/31/2009

Electronic Signature of Signing Officer or Director

Date