

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757731

FILED
Feb 10, 2009
Secretary of State

Entity Name: FIRST UNITED METHODIST CHURCH OF LAKE WALES, INC.

Current Principal Place of Business:

230 NORTH FIFTH STREET
LAKE WALES, FL 33853

New Principal Place of Business:

Current Mailing Address:

230 NORTH FIFTH STREET
LAKE WALES, FL 33853

New Mailing Address:

FEI Number: 59-0651082

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TROUTMAN, JANICE
230 N. FIFTH STREET
LAKE WALES, FL 33853 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: CD () Delete
Name: DANIELS, ASA
Address: 116 FLORIDA GRACKLE COURT
City-St-Zip: FROSTPROOF, FL 33843

Title: SD () Delete
Name: WAMBLES, STEPHANIE
Address: POB 556
City-St-Zip: BABSON PARK, FL 338270556

Title: D () Delete
Name: ALLEN, RODNEY J
Address: 2403 CAPPs ROAD
City-St-Zip: LAKE WALES, FL 33898

Title: D () Delete
Name: HART, JOE
Address: 625 LORRAINE CIR
City-St-Zip: LAKE WALES, FL 33853

Title: D () Delete
Name: OAKLEY, MICHAEL
Address: 3636 SILVER OAK CRT
City-St-Zip: LAKE WALES, FL 33898

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: MORGAN, GLENDA
Address: 3351 HARBOR BEACH DRIVE
City-St-Zip: LAKE WALES, FL 33859 US

Title: SD (X) Change () Addition
Name: WAMBLES, STEPHANIE
Address: POB 556
City-St-Zip: BABSON PARK, FL 338270556 US

Title: D (X) Change () Addition
Name: ALLEN, RODNEY J
Address: 2403 CAPPs ROAD
City-St-Zip: LAKE WALES, FL 33898 US

Title: D (X) Change () Addition
Name: HART, JOE
Address: 625 LORRAINE CIR
City-St-Zip: LAKE WALES, FL 33853 US

Title: D (X) Change () Addition
Name: OAKLEY, MICHAEL
Address: 3636 SILVER OAK CRT
City-St-Zip: LAKE WALES, FL 33898 US

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: JOE HART

D

02/10/2009

Electronic Signature of Signing Officer or Director

Date