

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761669

FILED
Apr 02, 2007
Secretary of State

Entity Name: FIRST UNITED METHODIST CHURCH OF ST. CLOUD, INC.

Current Principal Place of Business:

1001 10TH STREET
ST. CLOUD, FL 347690322

New Principal Place of Business:

Current Mailing Address:

1001 10TH STREET
ST. CLOUD, FL 347690322

New Mailing Address:

FEI Number: 59-0782448

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CUMBIE, FRED H., II
4305 NEPTUNE RD
ST. CLOUD, FL 34769 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: CDP () Delete
Name: MOORE, FRANK O
Address: 3409 VILLAGE GREEN CT.
City-St-Zip: ST CLOUD, FL 34772

Title: SD () Delete
Name: WOOD, SCOTT
Address: 4801 DEER RUN RD.
City-St-Zip: SAINT CLOUD, FL 34772

Title: VCD () Delete
Name: PELKEY, RICHARD E
Address: 1457 SUGARBERRY LN
City-St-Zip: SAINT CLOUD, FL 34772

Title: T () Delete
Name: WILLIAMS, VIRGINIA M
Address: 5848 E. IRLO BRONSON MEM. HWY.
City-St-Zip: SAINT CLOUD, FL 34771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: HABERMAN, DAVID
Address: 4600 MILDRED BASS RD.
City-St-Zip: SAINT CLOUD, FL 34772

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANK MOORE

CDP

04/02/2007

Electronic Signature of Signing Officer or Director

Date