2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#763096

FILED Jaņ 15, 2<u>00</u>9 Secretary of State

Entity Name: ASBURY UNITED METHODIST CHURCH OF ORANGE PARK, INC

Current Principal Place of Business: New Principal Place of Business: 16 COLLEGE DR ORANGE PARK, FL 32065 **Current Mailing Address: New Mailing Address:** 16 COLLEGE DR. ORANGE PARK, FL 32065 FEI Number: 59-1659683 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOFFMAN, JAMES HOFFMAN, JAMES DR. 2600 BELLÉSHORE CT 2600 BELLÉSHORE CT ORANGE PARK,, FL 32065 ORANGE PARK,, FL 32065 US 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: JAMES HOFFMAN 01/15/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HOFFMAN, JAMES Name: Name: 2600 BELLESHORE CT Address: Address: City-St-Zip: ORANGE PARK, FL 32065 City-St-Zip: Title: Title: () Delete () Change () Addition Name: LEE, ESTHER Name: Address: 3196 FIRESIDE DRIVE Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: Title: FC () Delete Title: FC (X) Change () Addition VOIGT, KARL MARTIN, JANET Name: Name: 1797 HEARTH STREET 2331 EAGLE HARBOR PARKWAY Address: Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: ORANGE PARK, FL 32003 Title: TC () Delete Title: TC (X) Change () Addition Name: RENAUD, FRANK Name: HALL, JOSEPH D 2890 TANGLEWOOD BLVD 2140 TREASURE POINT RD Address: Address: City-St-Zip: ORANGE PARK, FL 32065 City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: JAMES HOFFMAN DR 01/15/2009