2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2007 8:00 am
Secretary of State
04-19-2007 90210 036 ****61.25

DOCUMENT # 765418

1. Entity Name

UNION CONGREGATIONAL CHURCH OF TAVARES, FLORIDA, INCORPORATED (UNITED CHURCH OF

Principal Place of Business	Mailing Address
302 ST. CLAIR ABRAMS AVE. TAVARES FL 32778	302 ST. CLAIR ABRAMS AVE. TAVARES FL 32778

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1716525 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PANTOLIN, MARGARET 2981 W BEAUMONT LANE EUSTIS FL 32726	Name: WEST, DEBORAH Street Address (P.O. Box Number is Not Acceptable): 4204 FAWN MEADOWS CIRCLE City: CLERMONT **FL** Zip Code: 34711

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 accept the obligations of registered agent.

SIGNATURE: Deborah West DEBORAH WEST, TREASURER 4-10-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EATON, JACK 440 MARINA LN TAVARES FL 32778	☒ Delete	D DELONG, OMER 11747 MAGNOLIA AVE TAVARES FL 32778	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P STAUDT, LEE P.O. BOX 452 ASTATULA FL 34705	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HINICK, DOROTHY 2240 ORKNEY DR LEESBURG FL 34788	☐ Delete	S MINICK (LAST NAME CORRECTION)	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PANTOLIN, MARGARET 2981 W BEAUMONT LN EUSTIS FL 32726	☒ Delete	TD WEST, DEBORAH 4204 FAWN MEADOWS CIRCLE CLERMONT FL 34711	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TYSON, MARY ANN 3002 LINMONT LN EUSTIS FL 32726	☐ Delete	D TYSON, MARY ANNE (NAME CORRECTION)	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STAUDT, ELAINE P.O. BOX 452 ASTATULA FL 34705	☒ Delete	D PANTOLIN, ROBERT 2981 W BEAUMONT LN EUSTIS FL 32726	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Deborah E. West DEBORAH E. WEST 4-10-07 352-343-6183
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number