

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767683

FILED  
Jan 04, 2011  
Secretary of State

**Entity Name:** FIRST UNITED METHODIST CHURCH OF KISSIMMEE, INC.

**Current Principal Place of Business:**

101 W. DAKIN AVE.  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

101 W. DAKIN AVE.  
KISSIMMEE, FL 34741

**New Mailing Address:**

**FEI Number:** 59-0624390      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MILLER, JOHN W  
2840 WAGON CT.  
ST. CLOUD, FL 34772      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: T  
Name: EPPERSON, ED  
Address: 5165 WARRIOR LANE  
City-St-Zip: KISSIMMEE, FL 34746

Title: T  
Name: MAYES, VIRGINIA  
Address: 528 CANTANIA LANE  
City-St-Zip: POINCIANA, FL 34759

Title: T  
Name: PARKER, MARCIA  
Address: 2342 SWEETWATER BLVD.  
City-St-Zip: SAINT CLOUD, FL 34772

Title: T  
Name: FRANKLIN, TOM  
Address: 2251 RAMBLING OAKS WAY  
City-St-Zip: KISSIMMEE, FL 34746

Title: T  
Name: SCHMIDT, WILLIAM  
Address: 1583 SKYLINE DRIVE  
City-St-Zip: KISSIMMEE, FL 34744

Title: T  
Name: BIBEAU, RHYS  
Address: PO BOX 451934  
City-St-Zip: KISSIMMEE, FL 34745

I hereby 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 all other like empowered.

SIGNATURE: JOHN MILLER

MR.

01/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date