


**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 831924</b>		
1. Entity Name <b>PRIMITIVE METHODIST CHURCH IN THE UNITED STATES OF AMERICA</b>		
Principal Place of Business <b>723 PRESTON LN. HATBORO, PA 19040</b>	Mailing Address <b>723 PRESTON LN. HATBORO, PA 19040 US</b>	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>PERKINS, FRED REV 5379 GEIGER CEMETERY RD. ZEPHYRHILLS, FL 33541</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>		
<b>Filing Fee is \$61.25 ✓ Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
<b>10. OFFICERS AND DIRECTORS</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P RITTS, KERRY R REV 723 PRESTON LANE HATBORO, PA 190402321</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DS ALLEN, REV DAVID JR 1199 LAWRENCE STREET LOWELL, MA 01852</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T BALDWIN, RAYMOND 18409 MILL RUN COURT LEESBURG, VA 201764583</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Rev Kerry R Ritts</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<b>REV. KERRY R. RITTS - PRESIDENT</b> <u>January 11, 2006</u> <b>215-675-2639</b> <small>Date Daytime Phone #</small>



01092006 No Chg-NP CR2E037 (11/05)

4. FEI Number <b>NOT APPLICABLE</b>	Applied For <b>Not Applicable</b>
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

1000000390028  
01/23/06-80009-001 70.00

**DO NOT WRITE  
IN THIS SPACE**