2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2010
Secretary of State

DOCUMENT# N01000002521

Entity Name: LYNN HAVEN UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

4501 TRANSMITTER ROAD
PANAMA CITY, FL 32404 US

New Principal Place of Business:

Current Mailing Address:

4501 TRANSMITTER ROAD
PANAMA CITY, FL 32404 US

New Mailing Address:

FEI Number: 59-2340570 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STOPKA III, ALBERT J
108 MOSLEY DRIVE
LYNN HAVEN, FL 32444 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: D
Name: BARBERIDES, EILEEN
Address: 2407 COUNTRY CLUB DR
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: D
Name: CARY, JAMES
Address: 100 MONTANA AVE
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: D
Name: FLOYD, NICK
Address: 3505 ROSEWOOD CIRCLE
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: D
Name: HALES, TAMMY
Address: 7101 GRASSY POINT RD
City-St-Zip: SOUTHPORT, FL 32409 US

Title: D
Name: NICOLALDE, DAVID
Address: 332 SKUNK VALLEY RD
City-St-Zip: SOUTHPORT, FL 32409 US

Title: D
Name: SHAW, WILLIAM
Address: 2402 CORAL DR
City-St-Zip: LYNN HAVEN, FL 32444 US

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: ANGEL D DIAZ ADMI 04/12/2010

Electronic Signature of Signing Officer or Director Date