

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000008692

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

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

**Current Principal Place of Business:**

14805 NW 140 STREET  
ALACHUA, FL 32615

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 668  
ALACHUA, FL 32616

**New Mailing Address:**

**FEI Number:** 59-1579665

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BINGHAM, MARVIN W JR  
14811 NW 140 STREET  
ALACHUA, FL 32615 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: PD  
Name: HALE, GUY  
Address: 15701 NW 278 AVE  
City-St-Zip: ALACHUA, FL 32615

Title: VP  
Name: COLSON, MARK  
Address: 24019 NW SR121  
City-St-Zip: ALACHUA, FL 32615

Title: T  
Name: HARRELL, PATRICIA  
Address: PO BOX 102  
City-St-Zip: WORTHINGTON SPRINGS, FL 32697

Title: SD  
Name: JONES, JUDY  
Address: 14212 NW 28TH AVE  
City-St-Zip: ALACHUA, FL 32615

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: PATRICIA A. HARRELL

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02/07/2012

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

\_\_\_\_\_  
Date