2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003625

FILED Feb 13, 2007 Secretary of State

Entity Name: SPRING GLEN UNITED METHODIST CHURCH, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 6007 BEACH BLVD JACKSONVILLE, FL 322162701 **Current Mailing Address: New Mailing Address:** 6007 BEACH BLVD JACKSONVILLE, FL 322162701 FEI Number: 59-0855409 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BOOKHOLT, CONNIE 13500 SUTTON PARK DR S STE 404 JACKSONVILLE, FL 32224 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CROSBY, CHARLES Name: Name: 1412 GLENDALE RD. W Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 US City-St-Zip: Title: Title: (X) Change () Addition () Delete BINKLEY, PAUL Name: TARVIN, RICHARD Name: Address: 1561 CORNELL RD Address: 3622 SPRING GLEN RD City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: JACKSONVILLE, FL 32207 US Title: () Delete Title: () Change () Addition GARLAND, LORI Name: Name: Address: 2617 ECTOR RD. N Address: City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: (X) Change () Addition Title: () Delete Title: Name: PALMER, BETTY Name: BRAD, BURLOG Address: 2469 DEAN Address: 7935 JAMAICA RD City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216 US Title: () Delete Title: () Change () Addition KEANE, CINDY Name: Name: 953 DUSKIN DRIVE Address: Address: JACKSONVILLE, FL 32216 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition CROSSWHITE, BEN BALDWIN, GREG Name: Name: Address: 7520 ALTAMA RD Address: 8601 BEACH BLVD #901 JACKSONVILLE, FL 32216 US JACKSONVILLE, FL 32216 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CHARLES CROSBY PRES 02/13/2007