2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2004
Secretary of State

DOCUMENT# N02000009363

Entity Name: THE FIRST UNITED METHODIST CHURCH OF PLANT CITY, FLORIDA, INC.

Current Principal Place of Business:

303 NORTH EVERS STREET
PLANT CITY, FL 33563

New Principal Place of Business:

Current Mailing Address:

303 NORTH EVERS STREET
PLANT CITY, FL 33563

New Mailing Address:

FEI Number: 59-0725541 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TRINKLE, ROBERT S
121 NORTH COLLINS STREET
PLANT CITY, FL 33563 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 ( ) Delete
Name: KIRKWOOD, KEVIN
Address: 1001 NORTH ROUX STREET
City-St-Zip: PLANT CITY, FL 33563

Title: PD ( ) Delete
Name: MUSSELWHITE, WILLIAM
Address: 1607 WOODSIDE DRIVE
City-St-Zip: PLANT CITY, FL 33563

Title: SD ( ) Delete
Name: WALDEN, CHARLOTTE
Address: 1104 NORTH PALM DRIVE
City-St-Zip: PLANT CITY, FL 33563

Title: D ( ) Delete
Name: WICKER, WILLIAM DR.
Address: 3205 HAWTHORNE CT
City-St-Zip: PLANT CITY, FL 33566

Title: D ( ) Delete
Name: BUTCHER, DAVID
Address: 808 SYLVAN DRIVE
City-St-Zip: PLANT CITY, FL 33563

Title: VPD ( ) Delete
Name: EDWARDS, ROBERT S
Address: 2815 HAMMOCK DR
City-St-Zip: PLANT CITY, F; 33566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: POU, MAIDA
Address: 1003 PINEDALE
City-St-Zip: PLANT CITY, FL 33566

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM MUSSELWHITE PD 07/01/2004

Electronic Signature of Signing Officer or Director — Date