

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000002755

**FILED**  
**Jan 09, 2010**  
**Secretary of State**

**Entity Name:** SIMPSON MEMORIAL UNITED METHODIST CHURCH RIVIERA BEACH, FLORIDA, INCORPORATED

**Current Principal Place of Business:**

1160 WEST 6TH STREET  
RIVIERA BEACH, FL 33404

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 10528  
RIVIERA BEACH, FL 33419

**New Mailing Address:**

**FEI Number:** 20-0763957

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATTHEWS, FRANK R ADMIN.  
4013 TEMPLE ST  
WEST PALM BEACH, FL 33407 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:** DAVIS, EARL BRD. CH  
**Address:** PO BOX 10528  
**City-St-Zip:** RIVIERA BEACH, FL 33419

**Title:** VD  
**Name:** FITZGERALD, SHANTEL ASST CH  
**Address:** PO BOX 10528  
**City-St-Zip:** WEST PALM BEACH, FL 33419

**Title:** SD  
**Name:** BURCH, JOYCE FIN SEC  
**Address:** PO BOX 10528  
**City-St-Zip:** WEST PALM BEACH, FL 33419

**Title:** TD  
**Name:** MATTHEWS, VERONA REV  
**Address:** PO BOX 10528  
**City-St-Zip:** RIVIERA BEACH, FL 33419

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:** VERONA HAGANS MATTHEWS

REV

01/09/2010

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

\_\_\_\_\_  
Date