

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005011

FILED
Jan 08, 2009
Secretary of State

Entity Name: COLEMAN UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

1502 E WARM SPRINGS AVE (HIGHWAY 301)
COLEMAN, FL 33521

New Principal Place of Business:

Current Mailing Address:

PO BOX 68
COLEMAN, FL 33521

New Mailing Address:

FEI Number: 59-2256496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLIS, JOE
8515 CENTRAL AVE
COLEMAN, FL 33521 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: CD () Delete
Name: ALLIS, JOE
Address: 8575 CENTRAL AVE
City-St-Zip: COLEMAN, FL 33521

Title: SD () Delete
Name: CHILDERS, KATHRYN
Address: PO BOX 125
City-St-Zip: COLEMAN, FL 33521

Title: TD () Delete
Name: BELL, ALBERT H
Address: 17937 SE 87TH MELROSE CT
City-St-Zip: THE VILLAGES, FL 32162

Title: D () Delete
Name: HENDERSON, EUGENE
Address: 178 N US 301
City-St-Zip: WILDWOOD, FL 34785

Title: P () Delete
Name: CLOSS, ROBERT
Address: 404 SANDLEWOOD LANE
City-St-Zip: WILDWOOD, FL 34785

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: HENDERSON, EUGENE
Address: 178 N US 301
City-St-Zip: SUMTERVILLE, FL 33585

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

I hereby certify that the information supplied with this filing does not qualify 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: MR. JOE ALLIS

CHP.

01/08/2009

Electronic Signature of Signing Officer or Director

Date