

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 27, 2009  
Secretary of State**

DOCUMENT# N04000000059

Entity Name: PONTE VEDRA UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

76 ROSCOE BLVD. S.  
PONTE VEDRA BCH, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

76 ROSCOE BLVD. S.  
PONTE VEDRA BCH, FL 32082

**New Mailing Address:**

FEI Number: 20-0547559      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LARSEN, JAMES E  
1628 MERROWWAY LANE  
PONTE VEDRA, FL 32081      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: T                    ( ) Delete  
Name: VOZZA, JOSEPH L  
Address: 108 GOVERNORS ROAD  
City-St-Zip: PONTE VEDRA BCH, FL 32082

Title: T                    ( ) Delete  
Name: PYLE, JAMES  
Address: 209 PABLO ROAD  
City-St-Zip: PONTE VEDRA BCH, FL 32082

Title: T                    ( ) Delete  
Name: SNYDER, RALPH  
Address: 408 SALT WIND COURT  
City-St-Zip: PONTE VEDRA BCH, FL 32082

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TRUS                (X) Change ( ) Addition  
Name: MCEVOY, JOHN  
Address: 440 CLEARWATER DRIVE  
City-St-Zip: PONTE VEDRA BCH, FL 32082

Title: TRUS                (X) Change ( ) Addition  
Name: PYLE, JAMES  
Address: 209 PABLO ROAD  
City-St-Zip: PONTE VEDRA BCH, FL 32082

Title: TRUS                (X) Change ( ) Addition  
Name: SNYDER, RALPH  
Address: 408 SALT WIND COURT  
City-St-Zip: PONTE VEDRA BCH, FL 32082

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: JAMES E. LARSEN

ACCT

02/27/2009

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

\_\_\_\_\_  
Date