2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003915

FILED Aug 11, 2009 Secretary of State

Entity Name: FIRST UNITED METHODIST CHURCH OF DEFUNIAK SPRINGS, FLORIDA, INC.

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
88 CIRCLE DEFUNIAR	EDR. KSPRINGS, FL 32435			
Current Mailing Address:		New Mailing Address:		
P. O. BOX DEFUNIAR	9 K SPRINGS, FL 32435			
In accordan	: 59-0877823 FEI Number Applied For() FE ce with s. 607.193(2)(b), F.S., the corporation did not rece Address of Current Registered Agent:			
GREEN, W 664 BALD\	VILLIAM H	Name and	Address of New Registered Agent.	
in the State	named entity submits this statement for the purpo e of Florida.	ose of changing i	ts registered office or registered agent, or both,	
SIGNATUF	RE: Electronic Signature of Registered Agent		Date	
OFFICERS	S AND DIRECTORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete BAKER, THOMAS D 491 ATES RANCH ROAD DEFUNIAK SPRINGS, FL 32433	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete BEASLEY, BOBBY 51 JACKSON AVENUE DEFUNIAK SPRINGS, FL 32435	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete WILLOUGHBY, JIM 435 PAUL RD DEFUNIAK SPRINGS, FL 32433	Title: Name: Address: City-St-Zip:	D (X) Change () Addition HOWELL, JASON 505 QUAIL RIDGE ROAD DEFUNIAK SPRINGS, FL 32435	
Title: Name: Address: City-St-Zip:	D () Delete COUNTS, DON 359 SHOEMAKER DR DEFUNIAK SPRINGS, FL 32433	Title: Name: Address: City-St-Zip:	D (X) Change () Addition CASWELL, CHARLES 368 HUNTER RIDGE ROAD DEFUNIAK SPRINGS, FL 32433	
Title: Name: Address: City-St-Zip:	D () Delete FIKE, GARY 970 KINGS LAKE BLVD DEFUNIAK SPRINGS, FL 32433	Title: Name: Address: City-St-Zip:	D (X) Change () Addition JACKSON, WALTER 441 COUNTRY CLUB DRIVE DEFUNIAK SPRINGS, FL 32435	
Title: Name:	D () Delete LATHINGHOUSE, MARIE 148 PLATEAU AVENUE	Title: Name: Address:	() Change () Addition	

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: JASON HOWELL MR. 08/11/2009