2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005762

FILED Apr 13, 2010 Secretary of State

Entity Name: POINT WASHINGTON UNITED METHODIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

1290 N CTY HWY 395

SANTA ROSA BEACH, FL 32459

Current Mailing Address: New Mailing Address:

1290 N CTY HWY 395

SANTA ROSA BEACH, FL 32459

FEI Number: 59-1971345 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WATSON, FRANKLIN H PA 5365 E CO HWY 30-A SUITE 105 SEAGROVE BEACH, FL 32459 US

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:

Γitle: C

Name: NUNN, TY

Address: 1070 N. CO. HWY 395

City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D

Name: BROOKS, LISA Address: 19 ADAMS WAY

City-St-Zip: SANTA ROSA BEACH, FL 32459

Title:

Name: GRUBB, SCOTT

Address: 889 N WALTON LAKESHORE DR City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: D

Name: COX, MIKE Address: 480 AMELIA LANE

City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: [

Name: MILLER, JEANNIE

Address: 101 SUMMERBREEZE ROAD City-St-Zip: PANAMA CITY BEACH, FL 32413

Title:

Name: MORGAN, JANE Address: 2709 E HWY 30A

City-St-Zip: SANTA ROSA BEACH, FL 32459

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: TY NUNN C 04/13/2010