

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005762

FILED
Jan 05, 2012
Secretary of State

Entity Name: POINT WASHINGTON UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

1290 N CTY HWY 395
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

1290 N CTY HWY 395
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: 59-1971345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, FRANKLIN H PA
5365 E CO HWY 30-A SUITE 105
SEAGROVE BEACH, FL 32459 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: C
Name: GATES, JAY
Address: 156 CAMP CREEK RD S
City-St-Zip: SEACREST BEACH, FL 32413

Title: D
Name: DOUG, HORNE
Address: 81 BEACHFRONT TRAIL
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D
Name: WATSON, FRANK
Address: 5365 E CO HWY 30-A SUITE 105
City-St-Zip: SEAGROVE BEACH, FL 32459

Title: D
Name: BAHR, GREG
Address: 525 LAKEVIEW DR
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D
Name: SOLOMON, JANE
Address: 2709 E CO HWY 30A
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D
Name: CARR, MH
Address: 74 CHRYSLER AVE
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: JAY GATES

CHR

01/05/2012

Electronic Signature of Signing Officer or Director

Date