

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004112

FILED  
Jan 30, 2008  
Secretary of State

Entity Name: SAINT ANDREW UNITED METHODIST CHURCH INCORPORATED

**Current Principal Place of Business:**

836 MICHIGAN AVE  
PENSACOLA, FL 32505

**New Principal Place of Business:**

**Current Mailing Address:**

836 MICHIGAN AVE  
PENSACOLA, FL 32505

**New Mailing Address:**

FEI Number: 59-1552670      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JOHNSON, JOHNNY W  
5605 TALQUIN AVE  
PENSACOLA, FL 32526      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: CT      ( ) Delete  
Name: HOLLAND, HANK  
Address: 5740 TALQUIN AVE  
City-St-Zip: PENSACOLA, FL 32526

Title: TCEO      ( ) Delete  
Name: JOHNSON, JOHNNY W  
Address: 5605 TALQUIN AVE  
City-St-Zip: PENSACOLA, FL 32526

Title: CC      ( ) Delete  
Name: NEVELS, PATTON  
Address: 2501 SEA ROBIN ROAD  
City-St-Zip: PENSACOLA, FL 32526

Title: TT      ( ) Delete  
Name: WEB, LINDA  
Address: 2679 TINOSA LANE  
City-St-Zip: PENSACOLA, FL 32526

Title: CT      ( ) Delete  
Name: KING, JOHN  
Address: 6022 CHICAGO AVE  
City-St-Zip: PENSACOLA, FL 32526

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

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: REV. JOHNNY W. JOHNSON

CEO

01/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date