

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005331

FILED
Jun 22, 2009
Secretary of State

Entity Name: EAST CENTRAL DISTRICT, FLORIDA ANNUAL CONFERENCE, UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

2125 E SOUTH ST
ORLANDO, FL 328036502

New Principal Place of Business:

Current Mailing Address:

2125 E SOUTH ST
ORLANDO, FL 328036502

New Mailing Address:

FEI Number: 20-2888983 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WHWW, INC
390 N. ORANGE BLVD.
STE. 1500
ORLANDO, FL 32801 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 () Delete
Name: AKERS, CHRIS
Address: 1082 CRYSTAL BOWL CIRCLE
City-St-Zip: CASSELBERRY, FL 32707

Title: VC () Delete
Name: ELYEA, DAVE
Address: 5668 FREEPORT DR
City-St-Zip: TAVARES, FL 32778

Title: T () Delete
Name: DAVIDSON, SCOTT
Address: 1541 MAGNOLIA AVE
City-St-Zip: WINTER PARK, FL 32789

Title: S () Delete
Name: CHANCE, CLARE
Address: 441 HARBOUR LIGHTS DR
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: CHANCE, CLARE
Address: 3628 OAKVIEW DR.
City-St-Zip: ORLANDO, FL 32812

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

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

Title: S (X) Change () Addition
Name: WILLIAMS, ALICE
Address: 5209 FIEDLVIEW CT
City-St-Zip: ORLANDO, FL 32819

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: DAVE ELYEA

VC

06/22/2009

Electronic Signature of Signing Officer or Director

Date