

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005350

FILED
Apr 16, 2009
Secretary of State

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

Current Principal Place of Business:

509 N E FIRST ST
GAINESVILLE, FL 32604

New Principal Place of Business:

Current Mailing Address:

P O BOX 15178
GAINESVILLE, FL 32604

New Mailing Address:

FEI Number: 20-2888810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHWW, INC
390 N ORANGE AVE 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: GASTON, IDELLA
Address: 1607 SW 63RD STREET ROAD
City-St-Zip: OCALA, FL 34476

Title: VC () Delete
Name: HOLLOMAN, HARRY
Address: 6934 SW 80TH DRIVE
City-St-Zip: GAINESVILLE, FL 32608

Title: S () Delete
Name: HORNER, SANDRA
Address: 3143 SW 41ST PLACE
City-St-Zip: GAINESVILLE, FL 32608

Title: T () Delete
Name: COOK, JIM
Address: 2621 NW 29TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: TC () Delete
Name: BINGHAM, MARVIN
Address: 11326 NW 122ND TERRACE
City-St-Zip: ALACHUA, FL 32615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: JONES, DAN
Address: 944 NE 19TH ST
City-St-Zip: OCALA, FL 34470

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: HARRY HOLLOMAN

VC

04/16/2009

Electronic Signature of Signing Officer or Director

Date