2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000012291

FILED Oct 12, 2009 Secretary of State

Entity Name: FIRST UNITED METHODIST CHURCH OF MEXICO BEACH, INC.

Current Principal Place of Business:		New Principal Place of Business:	
111A NORTH 22ND STREET MEXICO BEACH, FL 32410			
Current Mailing Address:		New Mailing Address:	
POST OFFICE BOX 13652 MEXICO BEACH, FL 32410			
FEI Number: 59-3136411 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () 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: Name and Address of New Registered Agent:			
COSTIN, CHARLES A 413 WILLIAMS AVENUE PORT ST. JOE, FL 32457 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: CHARLES A. COSTIN			
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () Delete WOOLLEY, CAROL B 720 FORTNER AVENUE MEXICO BEACH, FL 32410	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DV () Delete HERRING, MATHEW P.O. BOX 13746 MEXICO BEACH, FL 32410	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SD () Delete KERIGAN, JOHN ROUTE 3 BOX 170 PORT ST. JOE, FL 32456	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TD () Delete MARIOLIS, TEDDY POST OFFICE BOX 13435 MEXICO BEACH, FL 32410	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete SEEFELDT, VIRGINIA HC3 BOX 148 I PORT ST. JOE, FL 32456	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete HOWELL, EMILY RT. 3 BOX 145A PORT ST. JOE, FL 32456	Title: Name: Address: City-St-Zip:	() Change () Addition
I hereby ce Florida Sta	rtify that the information supplied with this filing does tutes. I further certify that the information indicated o	not qualify for the exemp n this report or suppleme	otion stated in Chapter 119, ental report is true and accurate and that

above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL B WOOLLEY

DP 10/12/2009

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