

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012015

FILED  
Jan 20, 2009  
Secretary of State

**Entity Name:** FIRST UNITED METHODIST CHURCH OF LAKE CITY, INC.

**Current Principal Place of Business:**

973 S. MARION AVE.  
LAKE CITY, FL 32025

**New Principal Place of Business:**

**Current Mailing Address:**

973 S. MARION AVE.  
LAKE CITY, FL 32025

**New Mailing Address:**

**FEI Number:** 59-0751918

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MCDAVID, TERRY  
178 SE HERNANDO AVE.  
LAKE CITY, FL 32025 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: T ( ) Delete  
Name: OLMSTED, FRANK  
Address: PO BOX 470  
City-St-Zip: LAKE CITY, FL 32056

Title: P ( ) Delete  
Name: KING, JACK L  
Address: 886 NW LOWLAND TERR  
City-St-Zip: LAKE CITY, FL 32055

Title: VP ( ) Delete  
Name: STANLEY, WOOLBERT  
Address: 131 NW OTTER CT  
City-St-Zip: LAKE CITY, FL 32055

Title: S ( ) Delete  
Name: MIKELL, SHIRLEY  
Address: 120 SW MARKS DR  
City-St-Zip: LAKE CITY, FL 32024

Title: S ( ) Delete  
Name: REGISTER, GENEVIEVE  
Address: PO BOX 3583  
City-St-Zip: LAKE CITY, FL 32056

Title: D ( ) Delete  
Name: MATHHEW, SIMPSON  
Address: 447 SW BREEZY DR  
City-St-Zip: LAKE CITY, FL 32025

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: P (X) Change ( ) Addition  
Name: WOOLBERT, STANLEY  
Address: 131 NW OTTER CT  
City-St-Zip: LAKE CITY, FL 32055

Title: VP (X) Change ( ) Addition  
Name: LESZKIEWICZ, JERRY  
Address: 787 SE EVERGREEN DRIVE  
City-St-Zip: LAKE CITY, FL 32025

Title: S (X) Change ( ) Addition  
Name: KELLEY, CHARLEEN  
Address: 219 SE FONTANA GLEN  
City-St-Zip: LAKE CITY, FL 32025

Title: S (X) Change ( ) Addition  
Name: REGISTER, GENEVIEVE  
Address: PO BOX 3583  
City-St-Zip: LAKE CITY, FL 32056

Title: D (X) Change ( ) Addition  
Name: CARROLL, CHARLES  
Address: 523 NW SCENIC LAKE DRIVE  
City-St-Zip: LAKE CITY, FL 32055

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: STANLEY WOOLBERT

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date