

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000001777

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** ST. JOHN UNITED METHODIST CHURCH OF FORT PIERCE, INC.

**Current Principal Place of Business:**

302 N 23RD STREET  
FT PIERCE, FL 34950

**New Principal Place of Business:**

**Current Mailing Address:**

302 N 23RD STREET  
FT PIERCE, FL 34950

**New Mailing Address:**

**FEI Number:** 35-2356728

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REMBERT, TYRONE  
302 N 23RD STREET  
FT PIERCE, FL 34950 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: TFC  
Name: REMBERT, TYRONE  
Address: 159 NW DORCHESTER ST  
City-St-Zip: PORT ST LUCIE, FL 34983

Title: T T  
Name: TALLEY, BRADY  
Address: 2209 10TH AVE  
City-St-Zip: VERO BEACH, FL 32960

Title: TFS  
Name: SHELTON, BERNELL  
Address: 5449 NW MOORHEN TRAIL BLDG 4-103  
City-St-Zip: PORT ST LUCIE, FL 34986

Title: TBOT  
Name: PRYOR, ANGELA W  
Address: 1508 AVENUE E  
City-St-Zip: FT PIERCE, FL 34950

Title: AATP  
Name: ROWE, DORIS  
Address: 3905 AVENUE T  
City-St-Zip: FT PIERCE, FL 34947

Title: P  
Name: WASHINGTON, DAVID T  
Address: 2016 GREY FALCON CIRCLE SW  
City-St-Zip: VERO BEACH, FL 32962

I hereby 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 all other like empowered.

SIGNATURE: DORIS ROWE

AATP

04/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date