

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000011370

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Entity Name:** LAKEWOOD UNITED METHODIST PRESCHOOL, INC.

**Current Principal Place of Business:**

6133 SAN JOSE BOULEVARD  
JACKSONVILLE, FL 32217

**New Principal Place of Business:**

**Current Mailing Address:**

6133 SAN JOSE BOULEVARD  
JACKSONVILLE, FL 32217

**New Mailing Address:**

**FEI Number:** 30-0590880

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ANDERSON, KENNETH G  
2951 FRONT ROAD  
JACKSONVILLE, FL 32257 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:** MRS.  
**Name:** DAVIS, BETH A MRS  
**Address:** 6133 SAN JOSE BOULEVARD  
**City-St-Zip:** JACKSONVILLE, FL 32217 US

**Title:** MRS.  
**Name:** COLEMAN, BETHANY K MRS  
**Address:** 6133 SAN JOSE BOULEVARD  
**City-St-Zip:** JACKSONVILLE, FL 32217 US

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:** BETH A. DAVIS

MRS.

02/09/2012

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

\_\_\_\_\_  
Date