

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19911

FILED
Feb 25, 2009
Secretary of State

Entity Name: FIRST UNITED METHODIST CHURCH OF STARKE, FLORIDA, INCORPORATED

Current Principal Place of Business:

200 N WALLNUT ST
STARKE, FL 32091

New Principal Place of Business:

Current Mailing Address:

PO BOX 157
STARKE, FL 32091

New Mailing Address:

FEI Number: 59-6033533

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRADY, DEBRA
200 NO WALNUT ST
STARKE, FL 32091 US

Name and Address of New Registered Agent:

GRADY, DEBRA
200 N WALNUT ST
STARKE, FL 32091 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: DEBRA GRADY

02/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANDREWS, A T
Address: PO BOX 57
City-St-Zip: GRAHAM, FL 32042

Title: CT () Delete
Name: HAYNES, ANNE
Address: 4320 SE 109TH ST
City-St-Zip: STARKE, FL 32091

Title: T () Delete
Name: GRADY, DEBRA
Address: 2782 LAKE STREET
City-St-Zip: LAWTEY, FL 32058

Title: TS () Delete
Name: OVERSTREET, DIMPLE
Address: 5378 NW CR 229
City-St-Zip: STARKE, FL 32091

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CREWS, LAURA
Address: 200 N. WALNUT STREET
City-St-Zip: STARKE, FL 32091

Title: CT (X) Change () Addition
Name: MCRAE, WILLIAM
Address: 200 N WALNUT ST.
City-St-Zip: STARKE, FL 32091

Title: T (X) Change () Addition
Name: GRADY, DEBRA
Address: 200 N. WALNUT STREET
City-St-Zip: STARKE, FL 32091

Title: TS (X) Change () Addition
Name: OVERSTREET, DIMPLE
Address: 200 N WALNUT ST.
City-St-Zip: STARKE, FL 32091

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: DEBRA GRADY

T

02/25/2009

Electronic Signature of Signing Officer or Director

Date