

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20760

FILED
Apr 24, 2009
Secretary of State

Entity Name: ST. LUKE UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

1394 EAST NINE MILE ROAD
PENSACOLA, FL 325145720 US

New Principal Place of Business:

Current Mailing Address:

1394 EAST NINE MILE ROAD
PENSACOLA, FL 325145720 US

New Mailing Address:

FEI Number: 59-2569623

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOLEK, STEPHEN J
11591 DUELING OAKS DRIVE
PENSACOLA, FL 32514 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: PD () Delete
Name: CUNNINGHAM, LEWE P
Address: 5108 ROWE TR
City-St-Zip: PACE, FL 32571

Title: D () Delete
Name: WEED, MIKE
Address: 421 NOWAK RD
City-St-Zip: CANTONMENT, FL 32533

Title: SD () Delete
Name: FAIRBANKS, TERESA
Address: 1269 TECUMDEH TR
City-St-Zip: PENSACOLA, FL 32514

Title: D () Delete
Name: FOXWORTH, WILLIAM
Address: 6846 COMMUNITY DR
City-St-Zip: PENSACOLA, FL 32526

Title: D () Delete
Name: TRASHER, JEFF
Address: 6357 HAMMOCK TRACE
City-St-Zip: MILTON, FL 35583

Title: D () Delete
Name: BROWN, JOHN
Address: 5660 DOVE DR
City-St-Zip: PACE, FL 32571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MACK, STEVE
Address: 1800 PEACHERS LANE
City-St-Zip: CANTONMENT, FL 32533

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

Title: D (X) Change () Addition
Name: SILVERTHORNE, ROGER
Address: 724 BOULDER CREEK DRIVE
City-St-Zip: PENSACOLA, FL 32514

Title: D (X) Change () Addition
Name: TURNAGE, DAVID
Address: 4766 BELVEDERE CIRCLE
City-St-Zip: PACE, FL 32571

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

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: LEWE CUNNINGHAM

PD

04/24/2009

Electronic Signature of Signing Officer or Director

Date