2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2011
Secretary of State

DOCUMENT# N21670

Entity Name: PINE UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

6827 NE 175 ST. RD.
CITRA, FL 32113

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1067
FT. MCCOY, FL 321341067

New Mailing Address:

FEI Number: 59-2957376 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HALL, HARMON
1500 NE 59 ST
OCALA, FL 34479 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
Name: GRANT, BURNIECE
Address: 10057 NE OLD JACK HWY 0001
City-St-Zip: ANTHONY, FL 32617

Title: D
Name: HAAS, DORIS
Address: 5120 NE 132 PLACE
City-St-Zip: ANTHONY, FL 32617

Title: STD
Name: KESSLER, EARIENE
Address: 15651 NE 137TH COURT
City-St-Zip: FORT MC COY, FL 32134

Title: D
Name: HAAS, DENNIS W
Address: 5120 NE 132 PL
City-St-Zip: ANTHONY, FL 32617

Title: D
Name: GEARARTS, ART
Address: 14790 NE 180TH STREET
City-St-Zip: FORT MC COY, FL 32134

Title: D
Name: HALL, HARMON
Address: 1500 NE 59TH STREET
City-St-Zip: OCALA, FL 34479

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 HAAS MS 01/12/2011

Electronic Signature of Signing Officer or Director — Date