

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22931

FILED
Feb 13, 2009
Secretary of State

Entity Name: ARLINGTON UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

1400 UNIVERSITY BOULEVARD N.
C/O CARL SCOTT SCHULER
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

1400 UNIVERSITY BOULEVARD N.
C/O CARL SCOTT SCHULER
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: 59-6011517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHULER, CARL SCOTT
1400 UNIVERSITY BOULEVARD N.
JACKSONVILLE, FL 32211 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: D () Delete
Name: REGISTER, DOUGLAS B
Address: 3849 SANDY SHORES DR
City-St-Zip: JACKSONVILLE, FL 32277

Title: T () Delete
Name: CHESTER, TOM J
Address: 825 LEONIE CIR
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: KELLY, EARL J
Address: 5514 DARLOW AVE
City-St-Zip: JACKSONVILLE, FL 32277

Title: D () Delete
Name: DRESCH, LYNDIA
Address: 12819 OAKLAND HILLS CT
City-St-Zip: JACKSONVILLE, FL 32225

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: LEE, BRIAN
Address: 3811 UNION PACIFIC DR. W.
City-St-Zip: JACKSONVILLE, FL 32246

Title: D () Change (X) Addition
Name: NEAL, STEWART
Address: 10519 WELLINGTON SPRINGS WAY
City-St-Zip: JACKSONVILLE, FL 32221

Title: D () Change (X) Addition
Name: CLAVERIE, GRAHAM
Address: 10506 INDIAN WALK ROAD
City-St-Zip: JACKSONVILLE, FL 32257

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: BRIAN LEE

D

02/13/2009

Electronic Signature of Signing Officer or Director

Date