2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24580

Apr 07, 2009 Secretary of State

Entity Name: FIRST UNITED METHODIST CHURCH OF BROOKSVILLE, INC. **Current Principal Place of Business: New Principal Place of Business:** 109 SOUTH BROAD STREET BROOKSVILLE, FL 34601 **Current Mailing Address: New Mailing Address:** 109 SOUTH BROAD STREET BROOKSVILLE, FL 34601 FEI Number: 59-1009938 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MASON, JOE M JR 101 S MAIN ST BROOKSVILLE, FL 34601 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition SULLIVAN, ADDISON GLEFJ, GERT Name: Name: 14 OLIVE ST. Address: 9884 SCEPTER AVE. Address: City-St-Zip: BROOKSVILLE, FL 34601 City-St-Zip: BROOKSVILLE, FL 34613 Title: Title: () Delete () Change () Addition MYLREA, PHILIP J Name: Name: Address: 14001 SNOW MEMORIAL HWY Address: City-St-Zip: BROOKSVILLE, FL 34601 City-St-Zip: Title: () Delete Title: (X) Change () Addition GLEJF, GERT HEALEY, GRANT Name: Name: 9884 SCEPTER AVE. Address: Address: 20817 MOELAND DR. City-St-Zip: BROOKSVILLE, FL 34613 City-St-Zip: BROOKSVILLE, FL 34610 Title: () Delete Title: () Change (X) Addition Name: Name: BECHTELHEIMER, KIM Address: Address: 18145 PARSONS RD. City-St-Zip: City-St-Zip: BROOKSVILLE, FL 34601

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: GERT GLEJF Τ 04/07/2009