2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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SIGNATURE:

May 02, 2005 8:00 am Secretary of State **DOCUMENT # N25192** 05-02-2005 90552 046 ****61.25 CENTENARY UNITED METHODIST CHURCH FOUNDATION, INC. Principal Place of Business Mailing Address C/O T. GLENN MITCHELL C/O T. GLENN MITCHELL 206 N. MADISON ST. 206 N. MADISON ST. QUINCY, FL 32351 . US QUINCY, FL 32351 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04262005 Chg-NP CR2E037 (10/03) City & State 4. FEI Number 59-2887437 City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MITCHELL, GLENN T 206 N MADISON ST Street Address (P.O. Box Number is Not Acceptable) QUINCY, FL 32351 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE IOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Due by May 1, 2005 Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITEF ☐ Delete TITLE Addition ☐ Change SUBER, RICHARD G NAME mcmillar NAME Duten Rd STREET ADDRESS 514 N. 9TH ST STREET ADDRESS **QUINCY, FL 32351** CITY+ST-7IP CITY-ST-ZIP TVP TITLE ☑ Delete TITLE ☐ Change Addition NAME SPOONER, EDWARD M NAME STREET ADDRESS 165 OAKLAND DRIVE STREET ADORESS CITY-ST-ZIP **QUINCY, FL 32351** CITY-ST-ZIP TP TITLE ☐ Detete TITLE Change Addition BASS, RICHARD NAME NAME STREET ADDRESS 435 N JACKSON ST STREET ADDRESS QUINCY, FL 32351 CITY-ST-7IP CITY-ST-7IP ☐ Delete TITLE TITLE ☐ Change ☐ Addition BASS, MARTHA NAME 717 NORTH 9TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP QUINCY, FL 323511731 CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Channe ■ Addition ROCKWOOD, CHARLES NAME NAME STREET ADDRESS 4005 BOBBIN BROOK CIR STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32312 CITY-ST-ZIP TS TITLE ☐ Detete TITLE ☐ Change Addition MITCHELL, GLENN T NAME NAME 206 N. MADISON ST STREET ADDRESS STREET ADDRESS **QUINCY, FL 32351** CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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