2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29407

FILED Feb 16, 2007 Secretary of State

Entity Name: FOREST UNITED METHODIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 17635 EAST HIGHWAY 40 SILVER SPRINGS, FL 32688 **Current Mailing Address: New Mailing Address:** 17635 EAST HIGHWAY 40 SILVER SPRINGS, FL 32688 FEI Number: 59-3379858 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: BINGHAM, TOM 4994 S.E. 180TH TERR. OCKLAWAHA, FL 32179 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 () Change () Addition BINGHAM, TOM Name: Name: 4994 S.E. 180TH TERR. Address: Address: City-St-Zip: OCKLAWAHA, FL 32179 City-St-Zip: Title: VC () Delete Title: VC (X) Change () Addition HEALD, BILL Name: FOSTER, JACK Name: Address: 18700 S.E. 55TH PLACE Address: 2080 S.E. 169TH AVE. RD. City-St-Zip: OCKLAWAHA, FL 32179 City-St-Zip: SILVER SPRINGS, FL 34488 Title: () Delete Title: () Change () Addition STEWART, THELMA Name: Name: 1754 S.E.169TH TERR. RD. Address: Address: City-St-Zip: SILVER SPRINGS, FL 34488 City-St-Zip: () Delete Title: Title: () Change () Addition Name: TABARRINI, JOE Name: Address: 551 S.E. 129 CT. Address: City-St-Zip: SILVER SPRINGS, FL 34488 City-St-Zip: Title: () Delete Title: (X) Change () Addition LAIL, TINA DECKER, BARRY Name: Name: 2170 S.E. 172ND TERR. 511 S.E. 180TH AVE. Address: Address: City-St-Zip: SILVER SPRINGS, FL 34488 City-St-Zip: OCKLAWAHA, FL 32179 Title: () Delete Title: (X) Change () Addition FOSTER, JACK HEALD, BILL Name: Name: Address: 2080 S.E. 169TH AVE. RD. Address: 18700 S.E. 55TH PLACE SILVER SPRINGS, FL 34488 OCKLAWAHA, FL 32179 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TOM BINGHAM C 02/16/2007