

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30026

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** ANTHONY UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

2936 NE 97TH STREET ROAD  
P. O. BOX 96  
ANTHONY, FL 32617

**New Principal Place of Business:**

2936 NE 97TH STREET ROAD  
ANTHONY, FL 32617

**Current Mailing Address:**

P. O. BOX 96  
ANTHONY, FL 32617

**New Mailing Address:**

**FEI Number:** 59-3415644

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TRIPLETT, JAMES E  
4655 NW 23RD CT  
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: PD  
Name: TRIPLETT, JAMES  
Address: 4655 NE 23RD CT  
City-St-Zip: Ocala, FL 34479

Title: VD  
Name: CYR, WALTER  
Address: 10300 NE JAX RD  
City-St-Zip: ANTHONY, FL 32617

Title: D  
Name: MELTON, WOODROW  
Address: 3049 NE 70TH STREET  
City-St-Zip: Ocala, FL 34479

Title: D  
Name: KUNZ, AL  
Address: 10850 NE HWY 315  
City-St-Zip: FORT MC COY, FL 32134

Title: D  
Name: WILLIAMS, CHARLOTTE  
Address: 9980 NE 23RD CT  
City-St-Zip: ANTHONY, FL 32617

Title: D  
Name: SHORT, BOOKER  
Address: 4325 NE 21ST ST  
City-St-Zip: Ocala, FL 34470

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: JEANETTE M CYR

TREA

02/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date