2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N31523

1. Entity Name
TALLAHASSEE HEIGHTS UNITED METHODIST CHURCH, INC.

Principal Place of Business	Mailing Address
3004 MAHAN DR TALLAHASSEE, FL 32308-5506	3004 MAHAN DR TALLAHASSEE, FL 32308-5506

01122004 Chg-NP CR2E037 (10/03) MRS

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1821518 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COLE, TERRY 3004 MAHAN DR TALLAHASSEE, FL 32308	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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.

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04/21/04--01005--014 ~~61.25~~ 61.25

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JONES, JERRY 5419 EASTON POINTE WAY TALLAHASSEE, FL 323171406	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Bruce Walden 4536 Maher Drive Talla FL 32308	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BIZZELL, DON 2010 LEE AVE. TALLAHASSEE, FL 32312	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Joann Nelson 1952 Raymond Tucker Rd Talla FL 32311	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JERRY, JAMES 5419 EASTON POINT WAY TALLAHASSEE, FL 32311	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Walt Glass 1294 Cordova Circle Talla FL 32317	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MIDDLETON, BRIAN 2832 CAREY LN TALLAHASSEE, FL 32308	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MELDER, MIKE 711 RED FERN RD. TALL, FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Debbie Arroyo 4514 Wimbleton Court Talla FL 32303	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T LLOYD, LARRY 1849 WAGON WHEEL CIRCLE TALLAHASSEE, FL 323177440	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Larry Lloyd 641 Eagle View Circle Talla FL 32311	☒ Change ☐ Addition

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.

SIGNATURE: Larry Lloyd
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #