

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32057

FILED
Feb 17, 2009
Secretary of State

Entity Name: ST. JAMES UNITED METHODIST CHURCH AT TAMPA PALMS, INC.

Current Principal Place of Business:

16202 BRUCE B DOWNS BLVD
TAMPA, FL 33647 US

New Principal Place of Business:

Current Mailing Address:

16202 BRUCE B DOWNS BLVD
TAMPA, FL 33647 US

New Mailing Address:

FEI Number: 59-2878557

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHORT, RILEY REV
16202 BRUCE B DOWNS BLVD
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

EZRA, STEVEN N REV
16202 BRUCE B DOWNS BLVD
TAMPA, FL 33647 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: STEVEN N. EZRA

02/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TOLLEY, ALTON
Address: 18503 CHADWYCK CT
City-St-Zip: TAMPA, FL 33647

Title: V () Delete
Name: DARLING, LINDA
Address: 10505 CORY LAKE DR
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: JOYCE, PATRICK
Address: 10252 SHADOW BRANCH DR
City-St-Zip: TAMPA, FL 33647

Title: T () Delete
Name: GRUBER, THOMAS
Address: 16350 HEATHROW DR
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: STEVE, DAY
Address: 20002 RYMAN PLACE
City-St-Zip: TAMPA, FL 33647

Title: S () Delete
Name: WHITE, ORVELLA
Address: 28549 FALLING LEAVES WAY
City-St-Zip: ZEPHYRHILLS, FL 33543

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: KNOX, ELAINE
Address: 1103 CRIMSON CLOVER LANE
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: BRAND, VIRGINIA
Address: 14022 CAPITOL DRIVE
City-St-Zip: TAMPA, FL 33613

Title: D (X) Change () Addition
Name: LOUDERMILK, ROY
Address: 30335 LETTINGWELL CIRCLE
City-St-Zip: TAMPA, FL 33543

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ALTON TOLLEY

DIR

02/17/2009

Electronic Signature of Signing Officer or Director

Date