

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32614

FILED
Mar 18, 2009
Secretary of State

Entity Name: FIRST UNITED METHODIST CHURCH OF PANAMA CITY, FL, INC.

Current Principal Place of Business:

903 E 4TH STREET
PANAMA CITY, FL 32401 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 248
PANAMA CITY, FL 32402 US

New Mailing Address:

FEI Number: 59-0714830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARREN, DAVID PASTOR
7246 BOAT RACE ROAD
PANAMA CITY, FL 32404 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: REV () Delete
Name: WARREN, DAVID PASTOR
Address: 7246 BOAT RACE ROAD
City-St-Zip: PANAMA CITY, FL 32404 US

Title: TRES () Delete
Name: RICE, DONALD
Address: 4911 HIGHPOINT DRIVE
City-St-Zip: PANAMA CITY, FL 32404

Title: TC () Delete
Name: TANNEHILL, JOE
Address: 1502 MISSOURI AVENUE
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: T () Delete
Name: ANDERSON, LAVOY
Address: 734 JENKS AVE
City-St-Zip: PANAMA CITY, FL 32401

Title: CT () Delete
Name: ST AMANT, THOMAS
Address: 324 ALEXANDER DRIVE
City-St-Zip: LYNN HAVEN, FL 32444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TRES (X) Change () Addition
Name: BROWN, BRENT
Address: 1009 W 9TH ST
City-St-Zip: PANAMA CITY, FL 32401

Title: TC (X) Change () Addition
Name: ST AMANT, THOMAS
Address: 324 ALEXANDER DR
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: T (X) Change () Addition
Name: WHITE, JERRY
Address: 2320 DRAGONFLY LANE
City-St-Zip: PANAMA CITY, FL 32405

Title: CCC (X) Change () Addition
Name: HAMMONS, KEN
Address: 106 HILLVIEW CIR
City-St-Zip: PANAMA CITY, FL 32405

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: BRENT BROWN

TRES

03/18/2009

Electronic Signature of Signing Officer or Director

Date