

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2006 8:00 am
Secretary of State

05-22-2006 90041 046 ****61.25

DOCUMENT # N33613 1. Entity Name HERNANDO UNITED METHODIST CHURCH, INC.					
Principal Place of Business 2125 E. NORVELL BRYANT HIGHWAY HERNANDO, FL 34442-2970 US			Mailing Address 2125 E. NORVELL BRYANT HIGHWAY HERNANDO, FL 34442-2970 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		05032006 Chg-NP CR2E037 (4/06)	
Zip		Country		4. FEI Number 59-2922751	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent BIDGOOD, ROGER 6451 N. CANOPY TER HERNANDO, FL 34442			7. Name and Address of New Registered Agent Name ROUNTREE, BETTY A. Street Address (P.O. Box Number is Not Acceptable) 2125 E. NORVELL BRYANT HWY City HERNANDO		
FL Zip Code 34442-2970			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.		
SIGNATURE <u>Betty A Rountree</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>			<u>BETTY A. ROUNTREE</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>		
15 MAY 2006 <small>DATE</small>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		
Filing Fee is \$61.25 Due by September 6, 2006			\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS GRAHAM, CAROL 1047 N CHERRY POP DR INVERNESS, FL 34453	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C/D CLARK, HARLAND 1317 N. NASHUA TERRACE INVERNESS, FL 34453-9545	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC CAHALA, JERRY 575 E BUCKINGHAM DR LECANTO, FL 34461	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC/D GILL, THOMAS 2400 FOREST DR., UNIT 107 INVERNESS, FL 34453-3704	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WELLS, GORDON 1620 E ALLEGRIE DR INVERNESS, FL 34453	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLBEK, HENRIETTA 550 N. INDEPENDENCE HWY, UNIT #63 INVERNESS, FL 34453-1677	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T AMATI, CHARLES 3673 N CHANDLER DR HERNANDO, FL 34442	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHELTON, ANTOINETTE 8295 E. TURNER CAMP RD INVERNESS, FL 34453-1702	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T NIERAS, BONNIE 2344 HAMPSHIRE ST INVERNESS, FL 34453	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D ROUNTREE, CARL T. 7053 W. COPENHAGEN ST. DUNNELLO, FL 34433-5410	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T COLOMB, RANDY 5150 E STOKES DR HERNANDO, FL 34442	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D ASHCROFT, SANDY 3924 E. ARBOR LAKES DR. HERNANDO, FL 34442-5506	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Harland Clark</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>HARLAND CLARK, CHAIRMAN</u> <small>Date</small>		
15 MAY 2006 <small>Daytime Phone #</small>					