

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34812

FILED
Mar 31, 2009
Secretary of State

Entity Name: TICE UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

4545 TICE STREET
TICE, FL 33905

New Principal Place of Business:

Current Mailing Address:

4545 TICE STREET
TICE, FL 33905

New Mailing Address:

FEI Number: 59-1155134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPMAN, CHERIE B
4545 TICE STREET
TICE, FL 33905 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: PC () Delete
Name: BLANEY, RICK
Address: 4820 SHADY RIVER LN
City-St-Zip: FORT MYERS, FL 33905

Title: TR () Delete
Name: CARLSEN, EDGAR
Address: 5681 BAYSHORE ROAD
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: T () Delete
Name: RINALD, JEAN
Address: 15498 CRYSTAL LAKE DRIVE
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: TR () Delete
Name: MORRISSEY, TINA
Address: 319 BROWNING DRIVE
City-St-Zip: FT. MYERS, FL 33905

Title: TR () Delete
Name: GRISWOLD, JULIE
Address: 185 FAIRVIEW AVENUE
City-St-Zip: FORT MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: JEAN RINALD

TREA

03/31/2009

Electronic Signature of Signing Officer or Director

Date