

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 09, 2008 08:00 AM
Secretary of State

DOCUMENT # N37940

1. Entity Name
MCCALL'S CHAPEL UNITED METHODIST CHURCH, INC.



Principal Place of Business
**7755 S. SR. 349
BRANFORD, FL 32008**

Mailing Address
**7755 S. SR. 349
BRANFORD, FL 32008**



01052008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
75-2995453

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**TAYLOR, FRED M
7755 S. SR. 349
BRANFORD, FL 32008**

**DO NOT WRITE
IN THIS SPACE**

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 *Fred M Taylor* *Fred M Taylor* *01-07-2008*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
TAYLOR, FRED M
7755 S. SR. 349
BRANFORD, FL 32008**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**C
WILLIAMS, CARL
4229 NW COURT
BELL, FL 32619**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
BERBERETTE, MINNIE C
POB 1648
CROSS CITY, FL 32628**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
POORE, HELEN BETH
1261 NE 340 HWY
BRANFORD, FL 32008**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000776628
01/09/08-80030-025 61.25

**DO NOT WRITE
IN THIS SPACE**

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: *Minnie C Berberette*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/06/08
Date

Treasurer
Daytime Phone #