## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39651

FILED Jun 07, 2009 Secretary of State

Entity Name: BEAR LAKE UNITED METHODIST CHURCH, INC.

urrent P	Principal Place of Business:	New Principal Plac	ce of Business:
	R LAKE RD. FL 32703		
urrent M	Mailing Address:	New Mailing Addr	ress:
	R LAKE RD. FL 32703		
	r: 59-2375256 FEI Number Applied For() Fl nce with s. 607.193(2)(b), F.S., the corporation did not rec	El Number Not Applicable ( ) eive the prior notice.	Certificate of Status Desired ( )
lame and	d Address of Current Registered Agent:	Name and Address	s of New Registered Agent:
010 BEA POPKA,	I, LAURA J R LAKE ROAD FL 32703 US		
he above	e named entity submits this statement for the purpo	ose of changing its registe	ered office or registered agent, or both,
	e named entity submits this statement for the purpo e of Florida.	ose of changing its registe	ered office or registered agent, or both,
	e of Florida.	ose of changing its registe	ered office or registered agent, or both,
the Stat	e of Florida.	ose of changing its registe	ered office or registered agent, or both,  Date
the Stat	e of Florida. RE:		
the Stat	RE:  Electronic Signature of Registered Agent		Date
n the Stati IGNATU PFFICER tle: ame: ddress:	e of Florida.  RE:  Electronic Signature of Registered Agent  S AND DIRECTORS:  C () Delete  HEEBNER, DONNA  551 MICHIGAN AVE	ADDITIONS/CHAN Title: Name: Address:	Date  NGES TO OFFICERS AND DIRECTOR
the State IGNATU  FFICER  tle: ame: ddress: ty-St-Zip: tle: ame: ddress:	Electronic Signature of Registered Agent  S AND DIRECTORS:  C () Delete HEEBNER, DONNA 551 MICHIGAN AVE ALTAMONTE SPRINGS, FL 32714  T () Delete QUINTON, LAURA J 12262 N. TIMBERLAND TRAIL	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	Date  NGES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition

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: LAURA QUINTON SEC 06/07/2009