2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40676

FILED Apr 01, 2008 Secretary of State

Entity Name: NORTH MERRITT ISLAND UNITED METHODIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 6355 N. COURTENAY PKWY MERRITT ISLAND, FL 32953 US **Current Mailing Address: New Mailing Address:** 6355 N. COURTENAY PKWY. 6355 N. COURTENAY PKWY MERRITT ISLAND, FL 32953 US MERRITT ISLAND, FL 32953 US FEI Number: 59-3040188 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: IVEY, WADE A 275 ÉAGLE LANE MERRITT ISLAND, FL 32953 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PTD () Delete () Change () Addition WADE, IVEY Name: Name: 275 EAGLE LANE Address: Address: City-St-Zip: MERRITT ISLAND, FL 32953 City-St-Zip: Title: () Delete Title: (X) Change () Addition COTTRELL, LES Name: COTTRELL, LESTER Name: Address: 108 RIVER HEIGHTS DRIVE Address: 108 RIVER HEIGHTS DRIVE City-St-Zip: COCOA, FL 32922 City-St-Zip: COCOA, FL 32922 Title: () Delete Title: (X) Change () Addition STACKHOUSE, SYLVIA EASTES, RICHARD Name: Name: 1300 ARLINGTON CIRCLE 3775 SAVANNAHS TRAIL Address: Address: City-St-Zip: MERRITT ISLAND, FL 32952 City-St-Zip: MERRITT ISLAND, FL 32953 () Delete Title: Title: (X) Change () Addition WHISENANT, BETTY Name: Name: HOBBS, PATRICIA 115 HIGHVIEW DRIVE 5775 TROPICAL TRAIL Address: Address: City-St-Zip: COCOA, FL 32922 City-St-Zip: MERRITT ISLAND, FL 32953 Title: () Delete Title: (X) Change () Addition BOYKEN, WADE STARK, RICHARD Name: Name: 6176 N. TROPICAL TRAIL 4105 SAND RIDGE DR. Address: Address: City-St-Zip: MERRITT ISLAND, FL 32953 City-St-Zip: MERRITT ISLAND, FL 32953 Title: () Delete Title: (X) Change () Addition WILLIAM, RILEY BOND, RAYMOND Name: Name: Address: 1267 POTOMAC DR Address: 4544 WOOD STORK DR. MERRITT ISLAND, FL 32952 MERRITT ISLAND, FL 32953 City-St-Zip: 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: WADE A. IVEY PTD 04/01/2008