2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44016

FILED Feb 10, 2011 Secretary of State

Entity Name: EDGEWATER UNITED METHODIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

19190 COCHRAN BLVD PORT CHARLOTTE, FL 33948

Current Mailing Address: New Mailing Address:

19190 COCHRAN BLVD 19190 COCHRAN BLVD

PORT CHARLOTTE, FL 33948 US PORT CHARLOTTE, FL 33948

FEI Number: 65-0235009 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:

HARRINGTON, MARJORE G 3245 DEPEW AVE

PORT CHARLOTTE, FL 33952 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:

Title: F

Name: BALLARD, THOMAS
Address: 2646 PEBBLE AVE
City-St-Zip: NORTH PORT, FL 34286

Title: D

Name: RITTA, ERNEST

Address: 18690 GOODMAN CIRCLE City-St-Zip: PORT CHARLOTTE, FL 33948

Title:

Name: HARRINGTON, MARJORIE G

Address: 3245 DEPEW AVE

City-St-Zip: PORT CHARLOTTE, FL 33952

Title:

Name: DOERNER, BRIAN Address: 4543 APOLLO AVE City-St-Zip: NORTH PORT, FL 34286

Title: D

Name: SPARROWGROVE, BARBARA
Address: 375 NORTHVIEW AVE

City-St-Zip: PORT CHARLOTTTE, FL 33954

Title: [

Name: JONES, DIANE

Address: 738 WHITE PINE TREE RD City-St-Zip: VENICE, FL 34285

I hereby 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 all other like empowered.

SIGNATURE: MARJORIE HARRINGTON T 02/10/2011