2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2007
Secretary of State

DOCUMENT# N48865

Entity Name: FIRST UNITED METHODIST CHURCH OF WINTER PARK, FLORIDA FOUNDATION, INC.

Current Principal Place of Business:

125 N. INTERLACHEN AVENUE
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

125 N. INTERLACHEN AVENUE
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 65-3133763 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WHWW, INC
390 N. ORANGE AVE
SUITE 1500
ORLANDO, FL 32801 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:	C	( ) Delete
Name:	EPPINGER, ANN	
Address:	1111 PRESERVE POINT DRIVE	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	S	( ) Delete
Name:	TOSHIE, LAURA MRS.	
Address:	1819 STONEHURST RD	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	VC	( ) Delete
Name:	KRECICKI, DREW	
Address:	1711 CHESTNUT AVE	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	T	( ) Delete
Name:	BENDER, RALPH	
Address:	771 PINETREE ROAD	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	T	( ) Delete
Name:	CULLENS, TOMMY L	
Address:	1274 SERENA DR	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	T	(X) Delete
Name:	KIRKWOOD, LARRY	
Address:	1699 JOELINE DRIVE	
City-St-Zip:	WINTER PARK, FL 32789	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	C	(X) Change ( ) Addition
Name:	KRECICKI, ANDREW	
Address:	1711 CHESTNUT AVE	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	S	(X) Change ( ) Addition
Name:	LIFRAGE, HEIDI	
Address:	1567 FOREST AVE	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	VC	(X) Change ( ) Addition
Name:	BROWN, LARRY	
Address:	4567 FOX ST	
City-St-Zip:	ORLANDO, FL 32814	
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 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: ANDREW KRECICKI C 01/04/2007

Electronic Signature of Signing Officer or Director — Date