

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50206

FILED
Jan 10, 2007
Secretary of State

Entity Name: THR FIRST UNITED METHODIST CHURCH OF DADE CITY, FLORIDA, INC.

Current Principal Place of Business:

37628 CHURCH AVE.
DADE CITY, FL 33525 US

New Principal Place of Business:

Current Mailing Address:

37628 CHURCH AVE.
DADE CITY, FL 33525 US

New Mailing Address:

FEI Number: 59-0866139

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, LEONARD H.
301 EAST MERIDIAN AVENUE
SUITE 314, CENTENNIAL BLDG.
DADE CITY, FL 33525 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: D () Delete
Name: JOHNSON, JACKSON C JR
Address: 37410 DIXIE AVE
City-St-Zip: DADE CITY, FL 33525

Title: PD () Delete
Name: CLARK, THOMAS
Address: 12601 TIMBER RUN
City-St-Zip: DADE CITY, FL 33525

Title: D () Delete
Name: PRUETT, CHARLES S JR
Address: 13520 3RD STREET
City-St-Zip: DADE CITY, FL 33525

Title: D () Delete
Name: RENAULT, JAMES O DR
Address: 13414-10TH STREET
City-St-Zip: DADE CITY, FL 33525

Title: D () Delete
Name: SMALLEY, RICHARD H
Address: 35230 ST. JOE RD.
City-St-Zip: DADE CITY, FL 33525

Title: D () Delete
Name: JOHNSON, NANCY B
Address: 14552 MT ZION RD
City-St-Zip: DADE CITY, FL 33523

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TISDALE, ROBERT
Address: 31827 AMBERLEA RD
City-St-Zip: DADE CITY, FL 33523

Title: PD (X) Change () Addition
Name: GRACE, JAMES M
Address: 13543 RIADA WAY
City-St-Zip: DADE CITY, FL 33525

Title: D (X) Change () Addition
Name: SUMNER, TODD
Address: 37051 CHURCH AVE.
City-St-Zip: DADE CITY, FL 33525

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HUDSON, JAMES L
Address: 38040 SUNSET AVE.
City-St-Zip: DADE CITY, FL 33525

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: JAMES M. GRACE

PRES

01/10/2007

Electronic Signature of Signing Officer or Director

Date