

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50206

FILED
Aug 11, 2009
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 ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

JOHNSON, LEONARD H.
301 EAST MERIDIAN AVENUE
SUITE 314, CENTENNIAL BLDG.
DADE CITY, FL 33525 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: D () Delete
Name: CLARK, THOMAS
Address: 12601 TIMBER RUN
City-St-Zip: DADE CITY, FL 33525

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

Title: D () Delete
Name: SUMNER, TODD
Address: 37051 CHURCH AVE.
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: HUDSON, JAMES L
Address: 38040 SUNSET AVE.
City-St-Zip: DADE CITY, FL 33525

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: DR. JAMES O. RENAULT

D

08/11/2009

Electronic Signature of Signing Officer or Director

Date