

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N92000000769

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** THE NOCATEE UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

4802 SW WELLES AV  
NOCATEE, FL 34268 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 393  
NOCATEE, FL 34268 US

**New Mailing Address:**

**FEI Number:** 65-0393818

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KIERGAARD, LARRY  
7820 GOLF BLVD  
ZOLFO SPRINGS, FL 33890 US

**Name and Address of New Registered Agent:**

FITZGERALD, HARLAND  
4810 NW HWY 72  
LOT 113  
ARCADIA, FL 34266 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:** HARLAND FITZGERALD

02/16/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** T  
**Name:** FITZGERALD, HARLAND  
**Address:** 4810 NW HWY 72, LOT 113  
**City-St-Zip:** ARCADIA, FL 34266

**Title:** T  
**Name:** KIERGAARD, LARRY  
**Address:** 7820 GOLF BLVD  
**City-St-Zip:** ZOLPHO SPRINGS, FL 33890

**Title:** T  
**Name:** ROWELL, WENDELL  
**Address:** 88 KENTUCKY AV  
**City-St-Zip:** ARCADIA, FL 34266

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:** RONALD LOFLIN

TREA

02/16/2010

Electronic Signature of Signing Officer or Director

Date