

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000893

FILED
Jul 28, 2008
Secretary of State

Entity Name: CORK UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

4815 WEST SAM ALLEN RD.
PLANT CITY, FL 33565

New Principal Place of Business:

Current Mailing Address:

4815 WEST SAM ALLEN RD.
PLANT CITY, FL 33565

New Mailing Address:

FEI Number: 59-2928393 **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:

DEVANE, JACK
3502 YOUNG RD
PLANT CITY, FL 33565 US

Name and Address of New Registered Agent:

BAHR, BARRY D
4815 W. SAM ALLEN RD.
PLANT CITY, FL 33565 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: BARRY BAHR

07/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: DER, DENNIS
Address: 3114 N. CHITTY RD
City-St-Zip: PLANT CITY, FL 33565

Title: T () Delete
Name: NORRIS, LAURA
Address: 12901 MC INTOSH RD
City-St-Zip: THONOTOSASSA, FL 33592

Title: T () Delete
Name: KIRKLAND, WILLIS
Address: 3118 N CHITTY RD
City-St-Zip: PLANT CITY, FL

Title: T () Delete
Name: SNOW, AUSTIN
Address: 3201 YOUNG ROAD
City-St-Zip: PLANT CITY, FL 33565

Title: T () Delete
Name: MOODY, RAY
Address: 1008 TERRACE DR
City-St-Zip: PLANT CITY, FL 33565

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: T (X) Change () Addition
Name: JOHNSON, JOHNNY
Address: 2425 HAWK GRIFFIN RD.
City-St-Zip: PLANT CITY, FL 33565

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: WILLIS KIRKLAND

T

07/28/2008

Electronic Signature of Signing Officer or Director

Date