

ANNUAL REPORT

DOCUMENT # N92000001026

1. Entity Name
MELROSE UNITED METHODIST CHURCH, INC.

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90396 002 ****61.25

Principal Place of Business
5807 HAMPTON STREET
MELROSE, FL 32666Mailing Address
PO BOX 576
MELROSE, FL 32666

03052006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-3234021

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

8. Name and Address of Current Registered Agent

GWEN CADEY-WILLIAM
129 CRYSTAL LAKE DR.
MELROSE, FL 32666

7. Name and Address of New Registered Agent

Name Donna R. DiPesa
 Street Address (P.O. Box Number is Not Acceptable)
7654 Grand Mesa Avenue
 City Keystone Heights, FL Zip Code 32656

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-9-06

DATE

Filing Fee is \$61.25
Due by May 1, 20069. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE CBT ☒ Delete
 NAME CADEY-WILLIAM, GWEN
 STREET ADDRESS 129 CRYSTAL LAKE DR.
 CITY-ST-ZIP MELROSE, FL 32666

TITLE T ☐ Delete
 NAME TUCKER, VERA
 STREET ADDRESS 21301 NE 35TH PLACE
 CITY-ST-ZIP HAWTHORNE, FL 32640

TITLE ST ☒ Delete
 NAME STINSON, WILLIAM
 STREET ADDRESS 101 CYPRESS
 CITY-ST-ZIP MELROSE, FL 32666

TITLE R S I T ☐ Delete
 NAME BLANKENSHIP, PAT
 STREET ADDRESS 145 HILLTOP LOOP
 CITY-ST-ZIP HAWTHORNE, FL 32640

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE CBT ☐ Change ☒ Addition
 NAME Donna R. DiPesa
 STREET ADDRESS 7654 Grand Mesa Ave.
 CITY-ST-ZIP Keystone Heights, FL 32656

TITLE R ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE C ☐ Change ☒ Addition
 NAME Richard Stony
 STREET ADDRESS 105 S. Starlake Drive
 CITY-ST-ZIP Hawthorne, FL 32640

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: