## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 08, 2005 8:00 am Secretary of State

DOCUMENT # N9300002430					Secr	etary	of State
1. Entity Name FERRY PASS UNITED METHODIST CHURCH, INC.					03-08-2	2005 90183	3 025 ****61.25
Principal Plac 7300 N DAV PENSACOLA		Mailing Address 7300 N DAVIS HWY PENSACOLA, FL				J	UUGGUUI
2. Principal P	Place of Business	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01262005 Chg-NP	CR2E	037 (10/03)
City & State		City & State			4. FEI Number 59-3282863		Applied For Not Applicable
<sup>Zip</sup> 32 <sup>I</sup>	504 Country	32504	Country		5. Certificate of Status Des	ired 🔲	\$8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent			7. Name and Address of f	lew Registered	d Agent
MITCHELL MALLIANA			Name	Name			
MITCHELL, WILLIAM P.O. BOX 30589 3289 SUMMIT BLVD			Street	Street Address (P.O. Box Number is Not Acceptable)			
PENSACO	DLA, FL 32503		City				Zip Code
						F	<u> </u>
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							
				-			<del></del>
ļ	Filing Fee is \$61.25	9. Election Camp	face Figure to -			Made abou	ck payable to
	Due by May 1, 2005	Trust Fund Co		· 🗆	\$5.00 May Be Added to Fees		artment of State
10.	- •	Trust Fund Co				Florida Dépi	artment of State
10.	Due by May 1, 2005	Trust Fund Co	entribution.		Added to Fees	Florida Dépi	artment of State
<del>}</del>	Due by May 1, 2005 OFFICERS AND DIE	Trust Fund Co	ntribution.		Added to Fees  ADDITIONS/CHANGES TO OF	Florida Dépa	DIRECTORS IN 10  Change Addition
TITLE	OFFICERS AND DIF	Trust Fund Co	ntribution.		Added to Fees  ADDITIONS/CHANGES TO OF	Florida Dépa	DIRECTORS IN 10  Change Addition
TITLE NAMÉ	OFFICERS AND DIF	Trust Fund Co	TILE NAME		Added to Fees  ADDITIONS/CHANGES TO OF	Florida Dépa	DIRECTORS IN 10  Change Addition
TITLE NAME STREET ADDRESS	Due by May 1, 2005  OFFICERS AND DIF  DC  CLARK, CHARLES E  8246 RIDGEFIELD ROAD	Trust Fund Co	ITLE NAME STREET ADDRESS		Added to Fees  ADDITIONS/CHANGES TO OR	Florida Dépa	DIRECTORS IN 10 Change Addition
NAME STREET ADDRESS CITY-ST-ZP	OFFICERS AND DIF OFFICERS AND DIF DC CLARK, CHARLES E 8246 RIDGEFIELD ROAD PENSACOLA, FL 32514	Trust Fund Co	TILE NAME STREET ADDRES CITY-ST-ZIP	PON	Added to Fees  ADDITIONS/CHANGES TO OF  ALLIAM H. A  BOO-14 W.  ENSACOLA	FICERS AND E  LLEN  FIZANCE  FL 3	DIRECTORS IN 10 Change Addition  Change Addition  Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIF OFFICERS AND DIF DC CLARK, CHARLES E 8246 RIDGEFIELD ROAD PENSACOLA, FL 32514 D	Trust Fund Co	TILE NAME STREET ADDRES CITY-ST-ZIP	POX 350 H	Added to Fees  ADDITIONS/CHANGES TO OF  ALLIAM H. A  BOO-14 W.  ENSACOLA  ARLES W	FICERS AND E  LLEN FIZANCI FL 3  JHIT	Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by May 1, 2005  OFFICERS AND DIF  CLARK, CHARLES E 8246 RIDGEFIELD ROAD PENSACOLA, FL 32514  D RAY, RUTH	Trust Fund Co	IT. ITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME	POX 350 H	Added to Fees  ADDITIONS/CHANGES TO OF  ALLIAM H. A  BOO-14 W.  ENSACOLA	FICERS AND E  LLEN FIZANCI FL 3  JHIT	Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
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SIGNATURE:

William H. Colley Chauman

7/24/8 850-572-566 Data Departs Prone #

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## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N93000002430 CONTINUATION PAGEZ ATTACHMENT FERRY PASS UNITED METHODIST CHURCH, INC. Principal Place of Business Mailing Address 7300 N DAVIS HWY 7300 N DAVIS HWY PENSACOLA, FL PENSACOLA, FL 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01262005 Chg-NP CR2E037 (10/03) City & State City & State FEI Numbe Applied For 59-3282863 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MITCHELL, WILLIAM Street Address (P.O. Box Number is Not Acceptable) P.O. BOX 30589 3289 SUMMIT BLVD PENSACOLA, FL 32503 City Zip Cope 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 DATE (NOTE, Registered Agent signature required when reinstating) Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS DC TITLE Addition TITLE Change Delete LEX DUMAS CREEK DR. CLARK, CHARLES E NAME NAME STREET ADDRESS 8246 RIDGEFIELD ROAD STREET ADORESS CITY-ST-ZIP PENSACOLA, FL 32514 CITY-ST-ZIP WILLIAM SCHELLER Change MAddition TITLE D TITLE RAY, RUTH NAME NAME 6001 HILLTOP RD. STREET ADDRESS STREET ADDRESS PENSACOLA PL 32504 Change MAddition CITY-ST-ZIP PENSACOLA, FL 32504 CITY-ST-ZIP TITLE IIILE DUMAS, ALEX NAME NAME 730 BOULDER CREEK DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZP PENSACOLA, FL 32514 CITY-ST-ZIF TITLE 🖺 Delete TITLE SMITH, RAY NAME NAME 7930 HILBURN ROAD STREET ADDRESS STREET ADDRESS CITY-ST-7IP PENSACOLA, FL 32514 CITY-ST-ZIP TITLE / Delete TITLE ☐ Change ■ Addition NAME CRAWFORD, LEONARD NAME STREET ADDRESS 7722 NORTH POINT RD. STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32514 City-St-ZIP TITLE Delete TITLE □ Change ☐ Addition PEACOCK, ANDRIANNA NAME STREET ADDRESS 2371 LE RUTH DR. STREET ADDRESS CITY-ST-ZP PENSACOLA, FL 32514 CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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.

WILLIAM H. ALLEN

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