

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002430

FILED  
Apr 15, 2009  
Secretary of State

**Entity Name:** FERRY PASS UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

7300 N DAVIS HWY  
PENSACOLA, FL 32504

**New Principal Place of Business:**

**Current Mailing Address:**

7300 N DAVIS HWY  
PENSACOLA, FL 32504

**New Mailing Address:**

**FEI Number:** 59-3282863

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MITCHELL, WILLIAM  
P.O. BOX 30589  
3289 SUMMIT BLVD  
PENSACOLA, FL 32503 US

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

MITCHELL, WILLIAM  
3289 SUMMIT BLVD  
PENSACOLA, FL 32503 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: \_\_\_\_\_

04/15/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DUMOS, ALEX  
Address: 730 BOULDER CREEK DRIVE  
City-St-Zip: PENSACOLA, FL 32514

Title: D ( ) Delete  
Name: HAYWOOD, WARD  
Address: 182 MIRABELLE CR.  
City-St-Zip: PENSACOLA, FL 32514

Title: D ( ) Delete  
Name: BEAGLES, LANA  
Address: 1611 LAHSING DR.  
City-St-Zip: PENSACOLA, FL 32504

Title: T/D ( ) Delete  
Name: GOODEN, CONNIE  
Address: 3016 ASHBURN LANE  
City-St-Zip: CANTONMENT, FL 32533

Title: PD ( ) Delete  
Name: CRAWFORD, LEONARD  
Address: 4722 NORTH POINTE BLVD  
City-St-Zip: PENSACOLA, FL 32514

Title: D ( ) Delete  
Name: CLARK, CHARLES  
Address: 8248 RIDGEFIELD RD.  
City-St-Zip: PENSACOLA, FL 32514

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: DUMAS, ALEX  
Address: 730 BOULDER CREEK DRIVE  
City-St-Zip: PENSACOLA, FL 32514

Title: D (X) Change ( ) Addition  
Name: WARD, HAYWOOD  
Address: 182 MIRABELLE CR.  
City-St-Zip: PENSACOLA, FL 32514

Title: D (X) Change ( ) Addition  
Name: BEAGLES, LANA  
Address: 1611 LANSING DR.  
City-St-Zip: PENSACOLA, FL 32504

Title: T/D (X) Change ( ) Addition  
Name: GOODEN, CONNIE  
Address: 3016 ASHBURY LANE  
City-St-Zip: CANTONMENT, FL 32533

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: LEONARD CRAWFORD

PD

04/15/2009

Electronic Signature of Signing Officer or Director

Date