

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003469

FILED
Jan 19, 2009
Secretary of State

Entity Name: WINTER HAVEN FREE METHODIST CHURCH, INC.

Current Principal Place of Business:

3019 LAKE ALFRED ROAD
WINTER HAVEN, FL 33881

New Principal Place of Business:

Current Mailing Address:

5421 SHARON TRAIL
LAKELAND, FL 33810 US

New Mailing Address:

FEI Number: 59-2469816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, PABLO G ESQ.
4203 N NEBRASKA AVE
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: LEHMAN, MARJORIE B
Address: 5421 SHARON TRAIL
City-St-Zip: LAKELAND, FL 33810 US

Title: T () Delete
Name: BAKER, C J
Address: 223 4TH ST. -JPV
City-St-Zip: WINTER HAVEN, FL

Title: T () Delete
Name: KING, GERALD
Address: 4503 LYNCHBURG ROAD
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Delete
Name: OLMSTEAD, MELFORD
Address: 107 GLENN ROAD
City-St-Zip: AUBURNDALE, FL 33823

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:

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: MARJORIE B. LEHMAN

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01/19/2009

Electronic Signature of Signing Officer or Director

Date