

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004917

FILED
Apr 29, 2005
Secretary of State

Entity Name: ST. MARK UNITED METHODIST CHURCH-PENSACOLA, INC.

Current Principal Place of Business:

2203 N. 12TH AVENUE
PENSACOLA, FL

New Principal Place of Business:

2203 N. 12TH AVENUE
PENSACOLA, FL 32503

Current Mailing Address:

2203 N. 12TH AVENUE
PENSACOLA, FL

New Mailing Address:

2203 N. 12TH AVENUE
PENSACOLA, FL 32503

FEI Number: 59-0799919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTOR, JENNIFER
6818 CHUCK WAGON LANE
MILTON, FL 32570 US

Name and Address of New Registered Agent:

CASTOR, JENNIFER
PO BOX 793
BAGDAD, FL 32530 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:

04/29/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: BRUNER, PEGGY
Address: 2135 HALLMARK DRIVE
City-St-Zip: PENSACOLA, FL 32504

Title: PD () Delete
Name: PITTMAN, DAVID
Address: 755 DEWEY ST.
City-St-Zip: PENSACOLA, FL 32514

Title: VD () Delete
Name: BRADLEY, BILL
Address: 1601 E. JORDAN STREET
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: PITTMAN, DAVID
Address: 3030 HIGHWAY 97
City-St-Zip: MOLINO, FL 32577

Title: VD (X) Change () Addition
Name: GREGORY, DON
Address: 501 EL CERRITO PLACE
City-St-Zip: PENSACOLA, FL 32503

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID PITTMAN

PD

04/29/2005

Electronic Signature of Signing Officer or Director

Date