2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000873

FILED Mar 29, 2009 Secretary of State

Entity Name: THE FIRST UNITED METHODIST CHURCH OF CALLAHAN, INC.

Current Principal Place of Business: New Principal Place of Business: 449648 US HWY 301 CALLAHAN, FL 32011 **Current Mailing Address: New Mailing Address:** PO BOX 157 CALLAHAN, FL 32011 US FEI Number: 59-3262968 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SLOAN, MARVIN 55372 ĆOOK DR CALLAHAN, FL 32011 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KARST, JOHN Name: Name: 54242 SHEFFIELD ROAD Address: Address: City-St-Zip: CALLAHAN, FL 32011 City-St-Zip: Title: Title: () Delete () Change () Addition SLOAN, MARVIN Name: Name: Address: 55372 COOK DR Address: City-St-Zip: CALLAHAN, FL 320110157 City-St-Zip: Title: () Delete Title: (X) Change () Addition BLAISE, JOHN BASS, JOHN K Name: Name: 44017 GREE MEADOWS LN 45064 ROBINWOOD CIRCLE Address: Address: City-St-Zip: CALLAHAN, FL 32011 City-St-Zip: CALLAHAN, FL 32011 Title: () Delete Title: D (X) Change () Addition Name: TANNER, BERTIE Name: BANKS, TUNIS 35592 QUAIL RD Address: 45434 CIRCLE DR Address: City-St-Zip: CALLAHAN, FL 32011 City-St-Zip: CALLAHAN, FL 32011 Title: () Delete Title: (X) Change () Addition NORTH, HOWARD VAN FOSSEN, EILEEN R Name: Name: 43365 FREEDOM DR 54354 MARLEE RD Address: Address: City-St-Zip: CALLAHAN, FL 32011 City-St-Zip: CALLAHAN, FL 32011 Title: () Delete Title: (X) Change () Addition GARVER, GARY JOHNSON, JOHN J Name: Name: Address: 46174 MIDDLE ROAD Address: 35739 QUAIL RD CALLAHAN, FL 32011 CALLAHAN, FL 32011 City-St-Zip: 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: MARVIN SLOAN P 03/29/2009