

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000873

FILED  
Feb 28, 2012  
Secretary of State

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

**Current Principal Place of Business:**

449648 US HWY 301  
CALLAHAN, FL 32011

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 157  
CALLAHAN, FL 32011 US

**New Mailing Address:**

**FEI Number:** 59-3262968

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SLOAN, MARVIN  
55372 COOK DR  
CALLAHAN, FL 32011 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: D  
Name: KARST, JOHN  
Address: 54242 SHEFFIELD ROAD  
City-St-Zip: CALLAHAN, FL 32011

Title: P  
Name: SLOAN, MARVIN  
Address: 55372 COOK DR  
City-St-Zip: CALLAHAN, FL 320110157

Title: D  
Name: BASS, JOHN K  
Address: 45064 ROBINWOOD CIRCLE  
City-St-Zip: CALLAHAN, FL 32011

Title: D  
Name: GARVER, GARY  
Address: 46174 MIDDLE ROAD  
City-St-Zip: CALLAHAN, FL 32011

Title: T  
Name: HIRSCH-WALKER, SHELLEY  
Address: 1786 THOMPkins LANDING RD.  
City-St-Zip: HILLIARD, FL 32046

Title: D  
Name: DAVIES, REBECCA  
Address: 44367 PINEBREEZE RD  
City-St-Zip: CALLAHAN, FL 32011

I hereby 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 all other like empowered.

SIGNATURE: MARVIN L. SLOAN

P

02/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date