

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000003161

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** WELLSPRING UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

10701 SHELDON RD  
TAMPA, FL 33626

**New Principal Place of Business:**

**Current Mailing Address:**

10701 SHELDON RD  
TAMPA, FL 33626

**New Mailing Address:**

**FEI Number:** 59-3250682

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHEWNING, SANDRA M BUS ADM  
14307 GRAFTON PLACE  
TAMPA, FL 33625 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: P  
Name: GRIFFEY, JERRY  
Address: 8527 ACORN RIDGE CT.  
City-St-Zip: TAMPA, FL 33625 US

Title: T  
Name: CHEWNING, SANDRA M BUS ADM  
Address: 14307 GRAFTON PLACE  
City-St-Zip: TAMPA, FL 33625 US

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: SANDRA CHEWNING

T

04/26/2010

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

\_\_\_\_\_  
Date