

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003161

FILED  
Apr 30, 2012  
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:**

LOCICERO, MARGARET C BOOKKEE  
2014 OLD OAK LANE  
SAFETY HARBOR, FL 34695 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: MARGARET LOCICERO

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T  
Name: FABIAN, DAVID  
Address: 10617 WAYBRIDGE DRIVE  
City-St-Zip: TAMPA, FL 33626 US

Title: F  
Name: SHANKLIN, JOSEPH DR.  
Address: 9630 W. PARK VILLAGE DRIVE  
City-St-Zip: TAMPA, FL 33626 US

Title: F  
Name: LUE, BETH  
Address: 13313 KRAMERIA WAY  
City-St-Zip: TAMPA, FL 33626 US

Title: SPR  
Name: MATER, CARL  
Address: 7508 OAKVISTA CIRCLE  
City-St-Zip: TAMPA, FL 33634 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: MARGARET LOCICERO

BK

04/30/2012

Electronic Signature of Signing Officer or Director

Date