

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005216

FILED
Jan 29, 2007
Secretary of State

Entity Name: ST. GEORGE ISLAND UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

201 EAST GULF BEACH DR.
ST. GEORGE ISLAND, FL 32328

New Principal Place of Business:

Current Mailing Address:

201 EAST GULF BEACH DR.
ST. GEORGE ISLAND, FL 32328

New Mailing Address:

FEI Number: 23-7105929

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ETHRIDGE, CARLTON
541 W BAYSHORE DR
ST GEORGE ISLAND, FL 32328 US

Name and Address of New Registered Agent:

DAY, TOMMY
1643 GANNET TRAIL
ST GEORGE ISLAND, FL 32328 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: TOMMY DAY

01/29/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: THOMPSON, KAREN
Address: 2209 CONCH DR
City-St-Zip: ST. GEORGE ISLAND, FL 32328

Title: C () Delete
Name: ETHRIDGE, CARLTON
Address: 541 WEST BAYSHORE DR.
City-St-Zip: ST. GEORGE ISLAND, FL 32328

Title: T () Delete
Name: HUTCHINSON, DAVID L
Address: 2210 SAILFISH DR.
City-St-Zip: ST. GEORGE ISLAND, FL 32328

Title: D () Delete
Name: ESTES, JIM
Address: P.O. BOX 585
City-St-Zip: EASTPOINT, FL 32328

Title: V () Delete
Name: SHADEL, CHUCK
Address: 347 PATTON STREET
City-St-Zip: ST GEORGE ISLAND, FL 32328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: C (X) Change () Addition
Name: DAY, TOMMY
Address: 1643 GANNET TRAIL
City-St-Zip: ST. GEORGE ISLAND, FL 32328

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: TOMMY DAY

MR

01/29/2007

Electronic Signature of Signing Officer or Director

Date