

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002614

FILED  
Feb 12, 2009  
Secretary of State

**Entity Name:** ST. MARK'S UNITED METHODIST CHURCH OF OCALA, INC.

**Current Principal Place of Business:**

1839 N.E. 8TH ROAD  
OCALA, FL 34470

**New Principal Place of Business:**

**Current Mailing Address:**

1839 N.E. 8TH ROAD  
OCALA, FL 34470

**New Mailing Address:**

**FEI Number:** 59-3330149

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARVILLE, SHIRLEY  
1839 N.E. 8TH ROAD  
OCALA, FL 34470 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 ( ) Delete  
Name: ELLIS, MARTIN  
Address: 3920 NE 6 CT  
City-St-Zip: OCALA, FL 34479

Title: T ( ) Delete  
Name: SHAFFER, GEORGE H  
Address: 4500-36 NW BLITCHTON RD  
City-St-Zip: OCALA, FL 34482

Title: P ( ) Delete  
Name: CHAMBLESS, JIM  
Address: 1738 SE 7 ST  
City-St-Zip: OCALA, FL 34471

Title: V ( ) Delete  
Name: LLOYD, WILMA  
Address: C/O 1839 N.E. 8TH ROAD  
City-St-Zip: OCALA, FL 34470

Title: S ( ) Delete  
Name: HARVILLE, SHIRLEY  
Address: 1839 NE 8 RD  
City-St-Zip: OCALA, FL 34470

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: T (X) Change ( ) Addition  
Name: SHAFFER, GEORGE H  
Address: 4789 NW 23 LOOP  
City-St-Zip: OCALA, FL 34482

Title: D (X) Change ( ) Addition  
Name: FERRENTINO, EDWARD  
Address: 434 SW 14 ST  
City-St-Zip: OCALA, FL 34474

Title: V (X) Change ( ) Addition  
Name: LLOYD, WILMA  
Address: 1839 N.E. 8TH ROAD  
City-St-Zip: OCALA, FL 34470

Title: S (X) Change ( ) Addition  
Name: BAKER, SONYA  
Address: 2105 NE 48 ST  
City-St-Zip: OCALA, FL 34479

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: MARTIN A. ELLIS

PRES

02/12/2009

Electronic Signature of Signing Officer or Director

Date