

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004462

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** UNIVERSITY MINISTRIES CHURCH OF GOD IN CHRIST OF TALLAHASSEE, INC.

**Current Principal Place of Business:**

2640 OLD BAINBRIDGE ROAD  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

2184 GATES DR  
TALLAHASSEE, FL 32312

**New Mailing Address:**

FEI Number: 59-3359739

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BROWN, JOSEPH L  
2184 GATES DR  
TALLAHASSEE, FL 32312 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: PT  
Name: BROWN, JOSEPH L DR.  
Address: 2184 GATES DR  
City-St-Zip: TALLAHASSEE, FL 32308

Title: S  
Name: BROWN, JODIE D  
Address: 2184 GATES DR  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D  
Name: BROWN, JOSEPH W  
Address: 2184 GATES DR  
City-St-Zip: TALLAHASSEE, FL 32328

Title: D  
Name: BROWN, EDNA S  
Address: 2184 GATES DR  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D  
Name: BROWN, JOEDRECKA S  
Address: 12613 BASSBROOK LANE  
City-St-Zip: TAMPA, FL 33626

Title: D  
Name: MCEL RATH, RONALD  
Address: 6016 WOODSPRING DR  
City-St-Zip: HOPE MILLS, NC 28348

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: JOSEPH L.BROWN

P

02/17/2010

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

\_\_\_\_\_ Date