

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003304

FILED
Apr 29, 2007
Secretary of State

Entity Name: WILDWOOD UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

300 MASON STREET
WILDWOOD, FL 347854057

New Principal Place of Business:

Current Mailing Address:

300 MASON STREET
WILDWOOD, FL 347854057

New Mailing Address:

FEI Number: 59-3426207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THORNTON, RANDALL N
2008 NORTH C-470
LAKE PANASOFFKEE, FL 33538 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: D () Delete
Name: BALL, DAN
Address: 918 PAMELA STREET
City-St-Zip: WILDWOOD, FL 34785

Title: DV () Delete
Name: SEITTER, DON
Address: 1000 MONTEREY
City-St-Zip: LEESBURG, FL 34748

Title: DS () Delete
Name: COOPER, JULIE
Address: 4937 CR 116
City-St-Zip: WILDWOOD, FL 34785

Title: D () Delete
Name: CHAMBERS, BOB
Address: 601 SPANISH MOSS
City-St-Zip: WILDWOOD, FL 34785

Title: D () Delete
Name: MOYERS, CECIL
Address: 1024 PALM AVENUE
City-St-Zip: WILDWOOD, FL 34785

Title: DP () Delete
Name: HUNEKE, HELEN
Address: 5551 WILLIAMSBURG LANE
City-St-Zip: WILDWOOD, FL 34785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: DAN BALL

D

04/29/2007

Electronic Signature of Signing Officer or Director

Date