

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003952

FILED
Feb 07, 2007
Secretary of State

Entity Name: PIERSON UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

136 W 2ND ST
PIERSON, FL 32180

New Principal Place of Business:

Current Mailing Address:

P O BOX 38
PIERSON, FL 32180 US

New Mailing Address:

FEI Number: 59-2173440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOEHM, J RICHARD
435 SO RIDGEWOOD AVE
DAYTONA BEACH, FL 32122 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: T () Delete
Name: RODRIQUEZ, WILLIAM D
Address: 136 W 2ND ST
City-St-Zip: PIERSON, FL

Title: T () Delete
Name: MARTIN, JOHN W SR
Address: 136 W 2ND ST
City-St-Zip: PIERSON, FL 32180

Title: T () Delete
Name: BULLARD, THOMAS H
Address: 136 W 2ND ST
City-St-Zip: PIERSON, FL

Title: T () Delete
Name: SOWELL, JIMMIE
Address: 136 W 2ND ST
City-St-Zip: PEIRSON, FL 32180

Title: T () Delete
Name: HAGSTROM, LOU ELLEN
Address: 225 E TURNER ROAD
City-St-Zip: PIERSON, FL 32180

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:

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: LOUELLEN HAGSTROM

T

02/07/2007

Electronic Signature of Signing Officer or Director

Date