

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 10, 2008  
Secretary of State**

DOCUMENT# N98000006434

Entity Name: MYRTLE GROVE UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

1030 N. 57TH AVE.  
PENSACOLA, FL 32516

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3225  
PENSACOLA, FL 32516 US

**New Mailing Address:**

FEI Number: 59-6044762      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

AVERY, CHARLES  
824 N. 74TH AVE.  
PENSACOLA, FL 32506 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: LEWIS, KEN  
Address: 1908 GULF BAY LN  
City-St-Zip: PENSACOLA, FL 32506

Title: D ( ) Delete  
Name: HELTON, TOM  
Address: 302 RUBERIA AVE.  
City-St-Zip: PENSACOLA, FL 32507

Title: D ( ) Delete  
Name: MCHATTON,, MIKE  
Address: 7901 ATLAS ST  
City-St-Zip: PENSACOLA, FL 32506

Title: D ( ) Delete  
Name: HULIEN, LOU  
Address: 450 MEADSON LN  
City-St-Zip: PENSACOLA, FL 32506

Title: D ( ) Delete  
Name: LAGUENS, CAROL  
Address: 3105 LAS BRIAS  
City-St-Zip: PENSACOLA, FL 32526

Title: D ( ) Delete  
Name: MOULDER, AARON  
Address: 5708 ALMAX CT  
City-St-Zip: PENSACOLA, FL 32506

**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: KEN LEWIS

D

04/10/2008

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

\_\_\_\_\_  
Date