2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006838

FILED Apr 30, 2008 Secretary of State

Entity Name: KEENEY CHAPEL UNITED METHODIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

7735 DESTIN DR. 7736 DESTIN DR. TAMPA, FL 33619 TAMPA, FL 33619

Current Mailing Address: New Mailing Address:

P.O. BOX 4989

TAMPA, FL 336774989 US

FEI Number: 59-2900264 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CARTER, LEVI CARTER, LEVI D 8509 RIDÉIN RD. 8509 RIDEIN RD. US TAMPA, FL 33619 US TAMPA, FL 33619

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: LEVI D. CARTER 04/30/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PD () Delete (X) Change () Addition JONES, LOUIS J RON, HUBBARD C Name: Name: 4217 16TH ST. Address: 4623 EL PRADO BOULEVARD Address:

City-St-Zip: TAMPA, FL 33610 City-St-Zip: TAMPA, FL 33629

Title: VD Title: VD (X) Change () Addition () Delete WILLIAMS, CHRISTINE Name: WILLIAMS, CHRISTINE Name: Address: 410 BRENDA DR. Address: 410 BRENDA DR.

City-St-Zip: BRANDON, FL 33510 City-St-Zip: BRANDON, FL 33510

Title: () Delete Title: () Change () Addition

SCOTT, RHONIE SR. Name: Name: 1905 S. TAYLOR RD. Address: Address: City-St-Zip: SEFFNER, FL 33584 City-St-Zip:

Title: TD () Delete Title: TD (X) Change () Addition

Name: WILLIAMS, MORRIS Name: WILLIAMS, MORRIS Address: 410 BRENDA DR. Address: 410 BRENDA DR. City-St-Zip: BRANDON, FL 33510 City-St-Zip: BRANDON, FL 33510

Title: () Delete Title: () Change () Addition

CHERRENFRO, P.L. Name: Name: 7012 PARLIAMENT DR. Address: Address: City-St-Zip: TAMPA, FL 33619 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: RON C HUBBARD PD 04/30/2008