

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006838

FILED
Apr 22, 2009
Secretary of State

Entity Name: KEENEY CHAPEL UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

7736 DESTIN DR.
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4989
TAMPA, FL 336774989 US

New Mailing Address:

FEI Number: 59-2900264

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARTER, LEVI D
8509 RIDEIN RD.
TAMPA, FL 33619 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: PD () Delete
Name: RON, HUBBARD C
Address: 4623 EL PRADO BOULEVARD
City-St-Zip: TAMPA, FL 33629

Title: VD () Delete
Name: WILLIAMS, CHRISTINE
Address: 410 BRENDA DR.
City-St-Zip: BRANDON, FL 33510

Title: SD () Delete
Name: SCOTT, RHONIE SR.
Address: 1905 S. TAYLOR RD.
City-St-Zip: SEFFNER, FL 33584

Title: TD () Delete
Name: WILLIAMS, MORRIS
Address: 410 BRENDA DR.
City-St-Zip: BRANDON, FL 33510

Title: D () Delete
Name: CHERRENFRO, P.L.
Address: 7012 PARLIAMENT DR.
City-St-Zip: TAMPA, FL 33619

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RONALD, HUBBARD C
Address: 4623 EL PRADO BOULEVARD
City-St-Zip: TAMPA, FL 33629

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

Title: SD (X) Change () Addition
Name: SCOTT, RHONIE JR.
Address: 1905 S. TAYLOR RD.
City-St-Zip: SEFFNER, FL 33584

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

Title: D (X) Change () Addition
Name: CHASE, ELSIL
Address: 5805 20TH AVENUE
City-St-Zip: TAMPA, FL 33619

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: LEVI D. CARTER

RA

04/22/2009

Electronic Signature of Signing Officer or Director

Date