2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 22, 2009
Secretary of State

DOCUMENT# N99000007623

Entity Name: NEWBERRY UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

24845 WEST NEWBERRY ROAD
NEWBERRY, FL 32669

New Principal Place of Business:

Current Mailing Address:

PO BOX 475
NEWBERRY, FL 32669

New Mailing Address:

FEI Number: 59-2095488 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KLECKNER, KENNETH W JR.
25338 S.W. 16TH AVENUE
NEWBERRY, FL 32669 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:	PT	( ) Delete
Name:	ELLIOTT, GENE	
Address:	24845 WEST NEWBERRY ROAD	
City-St-Zip:	NEWBERRY, FL 32669	
Title:	VT	( ) Delete
Name:	FLEMING, DENNIS	
Address:	24845 WEST NEWBERRY ROAD	
City-St-Zip:	NEWBERRY, FL 32669	
Title:	T	( ) Delete
Name:	CUMBEE, CARROLL	
Address:	PO BOX 482	
City-St-Zip:	NEWBERRY, FL 32669	
Title:	TT	( ) Delete
Name:	TAYLOR, JENNIFER	
Address:	26208 SW 2ND AVE	
City-St-Zip:	NEWBERRY, FL 32669	
Title:	T	( ) Delete
Name:	SANDERS, ROBIN	
Address:	8410 67TH CT	
City-St-Zip:	TRENTON, FL 32693	
Title:	ST	( ) Delete
Name:	CZARNICK, NANCY	
Address:	8959 SE. 64TH ST.	
City-St-Zip:	TRENTON, FL 32693	

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: KENNETH W. KLECKNER, JR REV 07/22/2009

Electronic Signature of Signing Officer or Director — Date