

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764931

FILED
Jul 16, 2005
Secretary of State

Entity Name: FIRST UNITARIAN UNIVERSALIST CHURCH OF WEST VOLUSIA, INC.

Current Principal Place of Business:

820 N. FRANKFORT AVE.
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

820 N. FRANKFORT AVE.
P.O. BOX 592
DELAND, FL 327217592

New Mailing Address:

FEI Number: 59-2149563 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

STACY A. ECKERT, P.A.
2445 S. VOLUSIA AVE., C-3
ORANGE CITY,, FL 32763 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: MAUK, ALLISON
Address: 2255 LAKE RUBY ROAD
City-St-Zip: DELAND, FL 32724

Title: VPD () Delete
Name: SUMMEY, COLEEN
Address: 409 N. VIRGINIA AVE.
City-St-Zip: DELAND, FL 32724

Title: TD () Delete
Name: GLUCH, DAVE
Address: 1881 W. BERESFORD AVE.
City-St-Zip: DELAND, FL 32720

Title: SD () Delete
Name: ECKERT, STACY
Address: 2445 S. VOLUSIA AVE., C-3
City-St-Zip: ORANGE CITY, FL 32763

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALLISON MAUK

PD

07/16/2005

Electronic Signature of Signing Officer or Director

Date