Current Prin	cipal Place of Business:			
1800 CYPRESS	GARDENS BLVD.			
WINTER HAVE	N, FL 33884			
Current Mai	ing Address:			
1800 CYPRE	SS GARDENS BLVD.			
WINTER HA	VEN, FL 33884			
FEI Number: 59-1036243		Certificate of Status Desired: No		
Name and A	ddress of Current Registered Agent:			
ZIEGLER, MAU 4052 TRALEE I				
LAKE WALES,	FL 33859 US			
	FL 33859 US entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of Flo	orida.
The above named		stered office or regis	tered agent, or both, in the State of Flo	orida. 01/31/2022
The above named	entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of Flo	
The above named	entity submits this statement for the purpose of changing its regis MAUREEN ZIEGLER Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of Flo	01/31/2022
The above named	entity submits this statement for the purpose of changing its regis MAUREEN ZIEGLER Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of Flo	01/31/2022
The above named SIGNATURE Officer/Diree	entity submits this statement for the purpose of changing its regises MAUREEN ZIEGLER Electronic Signature of Registered Agent			01/31/2022
The above named SIGNATURE Officer/Direc Title	A entity submits this statement for the purpose of changing its regis MAUREEN ZIEGLER Electronic Signature of Registered Agent Ctor Detail : EXECUTIVE SECRETARY	Title	S	01/31/2022
The above named SIGNATURE Officer/Dired Title Name Address	entity submits this statement for the purpose of changing its registered Agent Electronic Signature of Registered Agent Ctor Detail : EXECUTIVE SECRETARY HARNER, LAURIE	Title Name	S ALLEN, DON 153 POE DRIVE	01/31/2022
The above named SIGNATURE Officer/Dired Title Name Address	Tentity submits this statement for the purpose of changing its registered Telectronic Signature of Registered Agent Telectronic Secretary EXECUTIVE SECRETARY HARNER, LAURIE 1453 GRAND CAYMAN CIRCLE	Title Name Address	S ALLEN, DON 153 POE DRIVE	01/31/2022
The above named SIGNATURE Officer/Dired Title Name Address	Tentity submits this statement for the purpose of changing its registered Telectronic Signature of Registered Agent Telectronic Secretary EXECUTIVE SECRETARY HARNER, LAURIE 1453 GRAND CAYMAN CIRCLE	Title Name Address	S ALLEN, DON 153 POE DRIVE	01/31/2022

I hereby 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 all other like empowered.

SIGNATURE: LAURIE HARNER

CHURCH **ADMINISTRATOR** 01/31/2022

Electronic Signature of Signing Officer/Director Detail

FILED Jan 31, 2022 **Secretary of State** 5061954793CC

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704404

Entity Name: ST. JOHN'S UNITED METHODIST CHURCH OF WINTER HAVEN, INC.

Name and Address of Current Registered Agen	nt:
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