

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724157

**FILED**  
**Jan 22, 2013**  
**Secretary of State**  
**CC4790135966**

**Entity Name:** FIRST UNITED METHODIST CHURCH OF CLEARWATER, INC.

**Current Principal Place of Business:**

411 TURNER STREET  
CLEARWATER, FL 33756

**Current Mailing Address:**

411 TURNER STREET  
CLEARWATER, FL 33756

**FEI Number:** 59-0747305

**Certificate of Status Desired:** No

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

STEPHEN O. COLE RA  
625 COURT STREET SUITE 200  
CLEARWATER, FL 33756 US

*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

**Officer/Director Detail :**

Title D  
Name SEVER, JAMES  
Address 1330 MORELAND #11  
City-State-Zip: CLEARWATER FL 33764

Title D  
Name LANGSTON, GILL  
Address 521 JASMINE WAY  
City-State-Zip: CLEARWATER FL 33756

Title D  
Name GATES, TOM  
Address 548 PALMETTO ROAD  
City-State-Zip: BELLEAIR FL 33756

Title D  
Name DERUSSY, VIVIAN  
Address 7897 SAILBOAT KEY BLVD  
City-State-Zip: S. PASADENA FL 33707

Title D  
Name BLANTON, NANCY  
Address 2373 WINDING GAP PLACE  
City-State-Zip: CLEARWATER FL 33765

Title D  
Name BOWERS, THOMAS  
Address 827 VICTORIA  
City-State-Zip: DUNEDIN FL 34698

Title D  
Name HUGHEY, EUGENE  
Address 535 S GLENWOOD AVE  
City-State-Zip: CLEARWATER FL 33756

Title D  
Name MESSENGER, FRANK  
Address 4038 SALEM SQUARE COURT  
City-State-Zip: PALM HARBOR FL 34685

**Continues on page 2**

*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:** MICHELLE R PREMUTO

**SECRETARY**

**01/22/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title D  
Name OWEN, RICK  
Address 690 WEATHERSFIELD DRIVE  
City-State-Zip: DUNEDIN FL 34698

Title S  
Name PREMUTO, MICHELLE  
Address 411 TURNER STREET  
City-State-Zip: CLEARWATER FL 33756