### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400003915

Entity Name: FIRST UNITED METHODIST CHURCH OF DEFUNIAK SPRINGS,

FLORIDA, INC.

Apr 27, 2015 Secretary of State CC6220233323

**FILED** 

#### **Current Principal Place of Business:**

88 CIRCLE DR.

DEFUNIAK SPRINGS, FL 32435

## **Current Mailing Address:**

P. O. BOX 9

DEFUNIAK SPRINGS, FL 32435

FEI Number: 59-0877823 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

GREEN, WILLIAM H 664 BALDWIN AVE.

DEFUNIAK SPRINGS, FL 32435 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 TRUSTEE Title TRUSTEE

NamePINTER, RONNameFREIBERGER, JEREMYAddress1264 CORBIN GAINEY ROADAddress12 HUCKABA ROAD WESTCity-State-Zip:DEFUNIAK SPRINGS FL 32435City-State-Zip:DEFUNIAK SPRINGS FL 32435

Title VP Title TRUSTEE

Name WILSON, ROB Name BOZEMAN, CHRIS

Address 675 WOODYARD ROAD Address 137 COLLEGE AVENUE

City-State-Zip: DEFUNIAK SPRINGS FL 32435 City-State-Zip: DEFUNIAK SPRINGS FL 32435

Title PRESIDENT Title SECRETARY

Name BAKER, TOM Name ASHLEY, BRIDGETT

Address 491 ATES RANCH ROAD Address 25 NORTH SAND PALM ROAD

City-State-Zip: DEFUNIAK SPRINGS FL 32433 City-State-Zip: FREEPORT FL 32439

Title TRUSTEE Title TRUSTEE

Name ROEHM, CINDY Name RUSSELL, ODON

Address P.O. BOX 169 Address 5433 US HWY 331 NORTH

City-State-Zip: DEFUNIK SPRINGS FL 32435 City-State-Zip: DEFUNIAK SPRINGS FL 32433

## 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: LARRY G TEASLEY

Electronic Signature of Signing Officer/Director Detail

**PASTOR** 

04/27/2015

# Officer/Director Detail Continued:

Title TRUSTEE Title PASTOR

NameWRANN, EDWARDNameTEASLEY, LARRY GAddress265 LAKEVIEW DRIVEAddress60 WEST AVENUE

City-State-Zip: DEFUNIAK SPRINGS FL 32433 City-State-Zip: DEFUNIAK SPRINGS FL 32435