Entity Name	F# N04000008233 e: FIRST UNITED METHODIST CHURCH OF (ncipal Place of Business: FL 32536	CRESTVIEW,	INC.	Jan 15, 2020 Secretary of State 2942804988CC
Current Mai	iling Address:			
599 8TH AV CRESTVIEV	E V, FL 32536 US			
FEI Number: 59-0882860 Certificate of St			Status Desired: Yes	
Name and A	Address of Current Registered Agent:			
ARNOLD, ANG	IE			
599 8TH AVE CRESTVIEW, F	FL 32536 US	stared office or regio	torod agant or both i	in the State of Elevide
599 8TH AVE CRESTVIEW, F The above name	FL 32536 US d entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, i	
599 8TH AVE CRESTVIEW, F The above name	EL 32536 US d entity submits this statement for the purpose of changing its regis E: ANGIE ARNOLD	stered office or regis	tered agent, or both, i	in the State of Florida. 01/15/2020 Date
599 8TH AVE CRESTVIEW, F The above name SIGNATURE	 FL 32536 US d entity submits this statement for the purpose of changing its regis E: ANGIE ARNOLD Electronic Signature of Registered Agent 	stered office or regis	tered agent, or both, i	01/15/2020
599 8TH AVE CRESTVIEW, F The above name SIGNATURE Officer/Dire	 EL 32536 US d entity submits this statement for the purpose of changing its register ANGIE ARNOLD Electronic Signature of Registered Agent Ctor Detail : 			01/15/2020
599 8TH AVE CRESTVIEW, F The above name SIGNATURE	 FL 32536 US d entity submits this statement for the purpose of changing its regis E: ANGIE ARNOLD Electronic Signature of Registered Agent 	stered office or regis Title Name	tered agent, or both, i D ARNOLD, ANGIE	01/15/2020 Date
599 8TH AVE CRESTVIEW, F The above name SIGNATURE Officer/Dire Title	 FL 32536 US d entity submits this statement for the purpose of changing its regis E: ANGIE ARNOLD Electronic Signature of Registered Agent C 	Title	D	01/15/2020 Date
599 8TH AVE CRESTVIEW, F The above name SIGNATURE Officer/Dire Title Name	 FL 32536 US d entity submits this statement for the purpose of changing its registered ANGIE ARNOLD Electronic Signature of Registered Agent Ctor Detail : C SUTHERLAND, NELL 6061 CARINA ROAD 	Title Name Address	D ARNOLD, ANGIE	01/15/2020 Date

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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: ANGIE ARNOLD

CHURCH ADMINISTRATOR 01/15/2020

FILED

Electronic Signature of Signing Officer/Director Detail