

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08774

FILED
Feb 22, 2023
Secretary of State
5457067816CC

Entity Name: UNITED METHODIST CHURCH OF PARRISH, INC.

Current Principal Place of Business:

12140 69TH STREET E
PARRISH, FL 34219

Current Mailing Address:

P O BOX 375
PARRISH, FL 34219 US

FEI Number: 59-2384853

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HANCOCK, WILLIAM H
5007 WOODLAWN CIR W
PALMETTO, FL 34221 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 TREASURER
Name HANCOCK, WILLIAM H
Address 5007 WOODLAWN CIR W
City-State-Zip: PALMETTO FL 34221

Title TRUSTEE
Name MERCER, LYNN
Address 433 SUNSET CIR N
City-State-Zip: ELLENTON FL 34222

Title TRUSTEE
Name KIRK, BILL
Address 16242 26TH ST E
City-State-Zip: PARRISH FL 34219

Title TRUSTEE
Name CRUSSELLE, BILL
Address 8508 BUCKINGHAM PL
City-State-Zip: PALMETTO FL 34221

Title TRUSTEE
Name STEINMAKER, PETER
Address 4314 FOREST CREEK TRAIL
City-State-Zip: PARRISH FL 34219

Title TRUSTEE
Name LEONARD, DAVID
Address 120 SUNFLOWER DR
City-State-Zip: PARRISH FL 34219

Title TRUSTEE
Name HAMILTON, JOHN
Address 4311 36TH AVE E
City-State-Zip: PALMETTO FL 34221

Title TRUSTEE
Name LONG, TED
Address 11545 SUMMIT ROCK CT
City-State-Zip: PARRISH FL 34219

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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: WILLIAM H HANCOCK

TREASURER

02/22/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name JAMES, POLLY
Address 2421 CRESTVIEW RD
City-State-Zip: WIMAUMA FL 33598

Title OFFICER
Name MAHONEY, DAVID
Address 412 COUNTRY MEADOWS WAY
City-State-Zip: BRADENTON FL 34212

Title OFFICER
Name SCHULTZ, DEBBIE
Address 5223 RUSHMERE CT
City-State-Zip: PALMETTTO FL 34221

Title OFFICER
Name ROMBOUGH, MAE
Address 7412 WESTWOOD DR
City-State-Zip: ELLENTON FL 34222

Title OFFICER
Name LLOYD, BILL
Address 7825 112TH AVE E
City-State-Zip: PARRISH FL 34219