2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25298

Entity Name: HANSON UNITED METHODIST CHURCH, INC.

FILED
Mar 25, 2017
Secretary of State
CC5929951523

Date

Current Principal Place of Business:

290 NE DAISY ST MADISON. FL 32340

Current Mailing Address:

P.O. BOX 272

PINETTA. FL 32350

FEI Number: 59-2165392 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORSE, THOMAS 8801 NE COLIN KELLY HIGHWAY PINETTA, FL 32350 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: THOMAS MORSE 03/25/2017

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title CHR. Title TRUS

 Name
 CHAMBLIN, JIMMY
 Name
 BOSSCHER, BILL

 Address
 1620 N SR 53
 Address
 1136 NE FERN AVE

 City-State-Zip:
 MADISON FL 32340
 City-State-Zip:
 PINETTA FL 32350

Title TRUS Title TRUS

Name MORSE, THOMAS Name TROYER, JOHN

Address 8801 NE COLIN KELLY HWY Address 6969 NE COLIN KELLY HWY

City-State-Zip: PINETTA FL 32350 City-State-Zip: MADISON FL 32340

Title TRUSTEE Title TRUSTEE

Electronic Signature of Signing Officer/Director Detail

Name PULLIAM, CHRIS Name PULLIAM, MISSY

Address 543 NE DAYLILY AVENUE Address 543 DAYLILY AVENUE

City-State-Zip: MADISON FL 32340 City-State-Zip: MADISON FL 32340

Title TRUSTEE

Name STRICKLAND, OPAL
Address 1520 DILL STREET
City-State-Zip: MADISON FL 32340

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: THOMAS MORSE TRUSTEE 03/25/2017