

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25298

**Entity Name:** HANSON UNITED METHODIST CHURCH, INC.

**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

04/23/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TRUS  
Name MORSE, THOMAS  
Address 8801 NE COLIN KELLY HWY  
City-State-Zip: PINETTA FL 32350

Title TRUS  
Name TROYER, JOHN  
Address 6969 NE COLIN KELLY HWY  
City-State-Zip: MADISON FL 32340

Title TRUSTEE  
Name PULLIAM, CHRIS  
Address 543 NE DAYLILY AVENUE  
City-State-Zip: MADISON FL 32340

Title TRUSTEE  
Name PULLIAM, MISSY  
Address 543 DAYLILY AVENUE  
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

04/23/2019

Electronic Signature of Signing Officer/Director Detail

Date