

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003079

Entity Name: NEW HORIZON CHURCH, UNITED METHODIST
CONGREGATION, CHARITABLE ENTITY, INC.**Current Principal Place of Business:**400 ORCHID DRIVE
HAINES CITY, FL 33844**Current Mailing Address:**400 ORCHID DRIVE
HAINES CITY, FL 33844 US**FEI Number: 59-1573252****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WEED, JULIE A
400 ORCHID DRIVE
HAINES CITY, FL 33844 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:** JULIE WEED**02/18/2020**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CORRESPONDING SECRETARY
Name WEED, JULIE
Address 1701 COMMERCE AVE., LOT 63
City-State-Zip: HAINES CITY FL 33844

Title TRUSTEE
Name METCALF, DEBRA
Address P. O. BOX 3273
City-State-Zip: DAVENPORT FL 33836

Title TRUSTEE
Name FOURNIER, PAUL
Address 131 VICTORIA DRIVE
City-State-Zip: HAINES CITY FL 33844

Title TRC
Name HAINES, BRUCE
Address 423 GOLDEN LANE
City-State-Zip: HAINES CITY FL 33844

Title TRUSTEE
Name DEAN, SR., RICKY LEROY
Address 2020 HORSE CREEK LANE
City-State-Zip: HAINES CITY FL 33844

Title TRUSTEE
Name CSVANY, THOMAS L
Address 204 SORRENTO ROAD
City-State-Zip: KISSIMMEE FL 34759

Title TRUSTEE
Name GILLETTE, SCOTT
Address 2325 ST. GEORGE DRIVE
City-State-Zip: DAVENPORT FL 33837

Title TRUSTEE
Name HARVEY, JACQUELINE
Address 221 MAGELLAN DRIVE
City-State-Zip: KISSIMMEE FL 34756

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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: JULIE A. WEED**02/18/2020**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name RODRIGUEZ, TIARA
Address 1220 BRADBURY ROAD
City-State-Zip: HAINES CITY FL 33844

Title TRUSTEE
Name VEGA, RAMON
Address 1706 DAVENPORT BLVD.
City-State-Zip: DAVENPORT FL 33837