Entity Nam	e: FLEMING ISLAND UNITED METHO	CC4487753320						
Current Principal Place of Business:								
7170 U.S. 17								
FLEMING ISL	AND, FL 32003							
Current Mailing Address:								
7170 U.S. ²	7							
FLEMING ISLAND, FL 32003								
FEI Numbe	Certificate of Status Desired: Yes							
Name and Address of Current Registered Agent:								
VON BALSON, TERRI D								
1274 GUM LEAF ROAD JACKSONVILLE, FL 32226 US								
The above nam	ed entity submits this statement for the purpose of chan	ging its registered office or regis	tered agent, or both, in the State of Florida.					
SIGNATUR	E: TERRI VON BALSON		02/05/2015	5				
	Electronic Signature of Registered Agent		Date	-				
Officer/Dir	ector Detail :							
Title	V	Title	TREASURER					
Name	COLLINS, MICHAEL	Name	BRASHEAR, KAREN					

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: FLEMING ISLAND UNITED METHODIST CHURCH, INC.

DOCUMENT# N95000004360

Name	COLLINS, MICHAEL	Name	BRASHEAR, KAREN
Address	2395 STONEY GLEN DRIVE	Address	1644 ROYAL FERN LANE
City-State-Zip:	ORANGE PARK FL 32003	City-State-Zip:	FLEMING ISLAND FL 32003
Title	CHAIRMAN, TRUSTEE COMMITTEE	Title	PASTOR
Name	BRASHEAR, BILL	Name	HALL, RYAN
Address	1644 ROYAL FERN LANE	Address	477 WYNFIELD CIRCLE
City-State-Zip:	FLEMING ISLAND FL 32003	City-State-Zip:	FLEMING ISLAND FL 32003
Title	SECRETARY	Title	CHAIRMAN, FINANCE COMMITTEE
Name	BORING, ALLISON	Name	OWENS, NICKIE
Address	1840 SEA PINES LANE	Address	4841 RAGGEDY POINT ROAD
City-State-Zip:	FLEMING ISLAND FL 32003	City-State-Zip:	FLEMING ISLAND FL 32003
Title	BUSINESS MANAGER		

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: TERRI D. VON BALSON

VON BALSON, TERRI D

1274 GUM LEAF ROAD

City-State-Zip: JACKSONVILLE FL 32226

Name

Address

BUSINESS MANAGER 02/05/2015

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 05, 2015

Secretary of State