2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003804

Entity Name: ALLEN MEMORIAL UNITED METHODIST CHURCH, INC.

FILED Feb 15, 2021 Secretary of State 0026695691CC

Date

Current Principal Place of Business:

206 PACE PKWY.

CANTONMENT. FL 32533

Current Mailing Address:

206 PACE PKWY.

CANTONMENT, FL 32533

FEI Number: 59-3429897 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SELF, DEBBIE 820 PINEY LN

CANTONMENT, FL 32533 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: DEBBIE SELF 02/15/2021

Electronic Signature of Registered Agent

Officer/Director Detail:

Title TRUSTEE Title TREASURER, TRUSTEE, PRESIDENT

Name KELLY, JIMMY Name SPARKS, RUSSELL A

Address 4483 CHESTNUT ROAD Address 10992 COUNTRY OSTRICH DRIVE

City-State-Zip: MOLINO FL 32577 City-State-Zip: PENSACOLA FL 32534

Title TRUSTEE Title TRUSTEE

Name CAMPBELL, CHARLES Name PERKINS, WAYNE

Address 1876 CHAVERS RD Address 789 NEAL RD

City-State-Zip: CANTONMENT FL 32533 City-State-Zip: CANTONMENT FL 32533

Title TRUSTEE Title TRUSTEE

Name ENGLAND, CATHY Name SPARKS, SHERRY

Address 806 COULTER AVE Address 10992 COUNTRY OSTRICH DRIVE

City-State-Zip: CANTONMENT FL 32533 City-State-Zip: PENSACOLA FL 32534

Title SECRETARY Title TRUSTEE CHAIR
Name MAUCHER, KATRINA Name WRIGHT, JOE

Address 1996 CHAVERS RD Address 16 W GONZALEZ ST

City-State-Zip: CANTONMENT FL 32533 City-State-Zip: PENSACOLA FL 32501

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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: RUSSELL SPARKS TREASURER 02/15/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title TRUSTEE

Name KIP, NORTON

Address 102 WOODLAND AVE

City-State-Zip: CANTONMENT FL 32533

Title VP

Name NORTON, JENNIE

Address 102 WOODLAND AVE

City-State-Zip: CANTONMENT FL 32533

Title TRUSTEE

Name MCKIM, LYNN

Address 3500 CRABTREE CHURCH RD

City-State-Zip: MOLINO FL 32577