

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32091

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** OCHLOCKONEE BAY UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

2780 SURF ROAD  
OCHLOCKNEE BAY, FL 32346

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 839  
PANACEA, FL 32346 US

**New Mailing Address:**

**FEI Number:** 59-2158195

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HALL, ELIZABETH A  
541 MASHES SANDS RD.  
OCHLOCKONEE BAY, FL 32346 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: JOINER, JACK  
Address: 2289 SURF ROAD  
City-St-Zip: PANACEA, FL 32346

Title: D  
Name: CONNORS, BRUCE SR.  
Address: 2289 SURF ROAD, A-3  
City-St-Zip: PANACEA, FL 32346

Title: D  
Name: SHEPARD, MARV  
Address: 51 SUNRISE LN  
City-St-Zip: OCHLOCKONEE BAY, FL 32346

Title: D  
Name: DAWS, GEORGE  
Address: 41 POMPANO DR  
City-St-Zip: OCHLOCKONEE, FL 32346

Title: D  
Name: HALL, VERONICA  
Address: 82 PERSIMMON RD.  
City-St-Zip: SOPCHOPPY, FL 32358

Title: D  
Name: BRANTLEY, CAROL  
Address: 519 MASHES SANDS RD  
City-St-Zip: OCHLOCKONEE BAY, FL 32346

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: ELIZABETH A. HALL

AGT

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date