FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUI	MENT # 703804	1	(5)									
MULBERRY UNITED METHODIST CHURCH, INC.							·					
MULDENTY UNITED METHODIST CHUNCH, INC.							A LEGALI AGAN BENGE AKAN KANIN AGAN BIAN BIAN BIAN BIAN AKAN BIAN AKAN BIAN AKAN					
Principal Place of Business Mailing Address												
306 NORTH CHURCH AVENUE. 306 NORTH CHURCH AVENUE MULBERRY FL 33860 MULBERRY FL 33860-2418												
							3. Date Incorporated of 03/28/1962	r Qualified	3a. Date of L			
9 Principal P	lace of Business	2a. Maitine	a Address				4. FEI Number		02/2	<u> </u>	plied For	
21 21	AUG OF BUSINESS	26	g nooress				59-1591125			_+	t Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certificate of Status	Doolrad	□ \$8.		dditional	
22		27					5. Certificate of Status		Fe		quired	
City & State	€	<u>├</u>	City & State				6. Election Campaign I Trust Fund Contribu	~			May Be o Fees	
Zip	Country	Zip		Countr	У		8. This corporation has	liability for in	ntangible tax un			
24	26 9. Name and Address of Curren	29 I Registered A	Agent	30	· · · —		Florida Statutes 10. Name and Address		Yes X No			
	8.											
FAULK, BERNICE				-	We	nde	11 Ridings					
6016 CHRISTINA DRIVE EAST				8:	Street A	lendell Ridings t Address (P.O. Box Number is Not Acceptable) 1955 Walyn Drive						
LAKELAND PL 33813				8:								
4 " 12 "				84	4 City				85	Zip C	Sode Shock	
	·			1	Mu.	1be:	rry,			338	860 l	
11. Pursuant office or r	tes, the aborated to authorized to authorized to authorized to a statute to a statu	ve-named o by the corp	corpo oratio	ration submits this statem n's board of directors. I h	ent for the p ereby accep	urpose of chang t the appointme	ing its nt as i	registered registered				
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with a position of Section 617.0503, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE												
12.	eligitatore, types or printed name of registered age OFFICERS AND		ble. (NO	13.	gent signature r	beniuper	ADDITIONS/CHANGE	S TO OFFIC	FRS AND DIREC	TOR	S IN 12	
TITLE	T	3 DITEOTORIO	DELETE	1.1 TITLE		T	1.551116116761111161		☐ Cha		X Addition	
NAME	DRIVER, RAY			1.2 NAME	. [W	endell Riding	S				
STREET ADDRESS	1205 THOAMSVILLE CIRCLE			1.3 STREE	ET ADDRESS		955 Walyn Dri					
CITY-ST-ZIP	LAKELAND FL			1.4 CITY	ST-ZIP	M	ulberry, FL	33860				
TITLE	1		LX DELETE	2.1 TITLE	Į	T			L Cha	ange	Addition	
NAME	FAULK, BERNICE			2.2 NAME			ris Sheridan					
STREET ADDRESS	6016 CHRISTINA DR. E.			2.3 STREE	ET ADDRESS		38 10th Drive					
CITY-ST-ZIP	LAKELAND FL		DELETE	2. 4 CITY 3.1 TITLE		M	ulberry, FL	33860	Chi		Addition	
TITLE	STEWART, MOSELLE		U DELETE	3.1 HILE 3.2 NAME					LJ UIII	ınge	LI ADDITION	
NAME STREET ADDRESS	205 NE 9TH ST				ET ADDRESS							
" . <u>.</u> .	MULBERRY FL			3.4. CITY	1						•	
CITY-ST-ZIP TITLE	T		DELETE	4.1 TITLE					☐ Cha	ange	Addition	
NAME	TIPPERY, TIM			4. 2 NAM						-		
STREET ADDRESS	4431 HOMEWOOD LANE			4.3 STREE	ET ADDRESS						j	
CITY-ST-ZIP	lakeland fl			4.4 CITY	ST-ZIP							
TITLE	T		DELETE	5.1 TITLE					Cha	ange	☐ Addition	
NAME	KEIM, RUSSELL			5.2 NAME								
STREET ADORESS	1445 HWY 37TH SOUTH			5.3 STREE	ET ADDRESS							
CITY-ST-ZIP	MULBERRY FL		Dr. Fre	5.4 CITY							[7] 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
TITLE	7		DELETE	6.1 TITLE			•		☐ Cha	ange	Addition	
NAME	CROSS, LAURIE			6.2 NAM8	1							
STREET ADDRESS	3495 PEACOCK LANE			1	ET ADDRESS						.	
CITY-ST-ZIP	MULBERRY FL			6.4 CITY-	ST - ZiP							

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

FILED

Apr 21 1997 8:00am

Secretary of State