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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 703804

1. Corporation Name

MULBERRY UNITED METHODIST CHURCH, INC.

Principal Place of Business
**306 NORTH CHURCH AVENUE.
MULBERRY FL 33860**

Mailing Address
**306 NORTH CHURCH AVENUE.
MULBERRY FL 33860**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/28/1962	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1591125	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24	Country	29	Country	30	

9. Name and Address of Current Registered Agent

**RIDINGS, WENDELL
3955 WALYN DRIVE
MULBERRY FL 33860**

10. Name and Address of New Registered Agent

81	Name George Hatch
82	Street Address (P.O. Box Number is Not Acceptable) 601 NE Second Avenue
83	
84	City Mulberry
85	Zip Code FL 33860

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 registered 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 obligations of Section 617.0503, Florida Statutes.

SIGNATURE *George Hatch* **George Hatch, Trustee Chair** 2/25/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TS DRIVER, RAY ☒ DELETE	1.1 TITLE	Trustee ☐ Change ☒ Addition
NAME	DRIVER, RAY	1.2 NAME	Roy Galberaith
STREET ADDRESS	1205 THOAMSVILLE CIRCLE	1.3 STREET ADDRESS	725 E. Carter Road
CITY-ST-ZIP	LAKELAND FL	1.4 CITY-ST-ZIP	Lakeland, FL 33813
TITLE	TC ☐ DELETE	2.1 TITLE	Trustee Secretary ☒ Change ☐ Addition
NAME	RIDINGS, WENDELL	2.2 NAME	
STREET ADDRESS	3955 WAYLN DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	MULBERRY FL	2.4 CITY-ST-ZIP	
TITLE	TV ☐ DELETE	3.1 TITLE	Trustee Chair ☒ Change ☐ Addition
NAME	HATCH, GEORGE	3.2 NAME	
STREET ADDRESS	601 NE 2ND AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MULBERRY FL 33860	3.4 CITY-ST-ZIP	
TITLE	T ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	STAWAR, TERRY	4.2 NAME	
STREET ADDRESS	1321 LAKE MIRIAM DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33813	4.4 CITY-ST-ZIP	
TITLE	T ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	SHERIDAN, IRS	5.2 NAME	
STREET ADDRESS	138 10TH DRIVE N.W.	5.3 STREET ADDRESS	
CITY-ST-ZIP	MULBERRY FL	5.4 CITY-ST-ZIP	
TITLE	T ☒ DELETE	6.1 TITLE	Trustee ☐ Change ☒ Addition
NAME	CROSS, LAURIE	6.2 NAME	Joni Whitney
STREET ADDRESS	3495 PEACOCK LANE	6.3 STREET ADDRESS	3680 Gary Road
CITY-ST-ZIP	MULBERRY FL	6.4 CITY-ST-ZIP	Mulberry, FL 33860

14. I 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, with all other like empowered.

SIGNATURE: *George Hatch* **George Hatch, Trustee Chair**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/99
Daytime Phone #

CR2E037 (1/98)