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NONPROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 706094 (0)

1. Corporation Name

PORT CHARLOTTE UNITED METHODIST CHURCH, INC.

Principal Place of Business	Mailing Address
21075 QUESADA AVE PORT CHARLOTTE FL 33952-9541 US	21075 QUESADA AVE PORT CHARLOTTE FL 33952-9541 US

3. Date Incorporated or Qualified: 08/28/1963
3a. Date of Last Report: 02/22/1995

2. Principal Place of Business
21 21075 Quesada Avenue
Suite, Apt. #, etc. 22
City & State 23 Port Charlotte, Fl. 33952
Zip 24 33952 Country 25 Charlotte

2a. Mailing Address
26 21075 Quesada Avnue
Suite, Apt. #, etc. 27
City & State 28 Port Charlotte, Fl.
Zip 29 33952 Country 30 Charlotte

4. FEI Number: 59-1022083 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MORE, CHARLOTTE
2100 KINGS HWY
UNIT 739
PORT CHARLOTTE FL 33980

10. Name and Address of New Registered Agent

81 Name: Ken Roberson
82 Street Address (P.O. Box Number is Not Acceptable): 2151 Tamiami Trail
83 Port Charlotte, Fl. 33952
84 City: Port Charlotte, Fl. FL 85 Zip Code: 33952

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: Ken Roberson KEN ROBERSON 2/7/96
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MORE, CHARLOTTE 2100 KINGS HWY UNIT 739 PORT CHARLOTTE FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	President Ken Roberson 2151 Tamiami Trail Port Charlotte, Fl. 33952	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ALIBERTI, MARGE 19293 ABHENRY CIRCLE PORT CHARLOTTE FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	James Ringham, 1st V.P. James Ringham 943 Fitzpatrick Ave. Port Charlotte, Fl. 33952	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RINGHAM, JAMES 23173 FITZPATRICK AVE PT CHARLOTTE FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	Vice-President Steve Gilray 25451 Kowloon Lake Port Charlotte, Fl. 33983	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD THOMAS, NORMA 331 DEPEW AVE PT CHARLOTTE FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	Secretary Norma Thomas 500 Windwood Port Charlotte, Fl. 33952	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROBERTON, KENNETH 2151 TAMIAMI TRAIL PT CHARLOTTE FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	Director Lee Duff 18217 Wolbrette Circle Port Charlotte, Fl. 33948	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EMERICH, GUY 21325 COACHMAN AVE. PORT CHARLOTTE FL	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	Director Jennifer McHale 23316 Painter Avenue Port Charlotte, Fl. 33954	☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Ken Roberson KEN ROBERSON 2/7/96 941-625-4856
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)