

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 1:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **707796** (9)

1. Corporation Name
ONECO UNITED METHODIST CHURCH, INC.

Principal Place of Business Mailing Address
2112 53RD AVENUE E 2112 53RD AVENUE E
P.O. BOX 908 P.O. BOX 908
ONECO FL 34264 ONECO FL 34264

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **09/11/1964** 3a. Date of Last Report **03/25/1994**

4. FEI Number **70-7796510** 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

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

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

2. Principal Place of Business 2a. Mailing Address

21. Suits, Apt. #, etc. 26. Suits, Apt. #, etc.

22. City & State 27. City & State

23. Zip Country 28. Zip Country

24. Zip Country 25. Zip Country 29. Zip Country 30. Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PARENT, MARGARET W
2219 51ST AVE E
BRADENTON FL 34203

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition

TITLE SD
NAME BENSEN, DONALD
STREET ADDRESS 5612 28TH ST W
CITY - ST - ZIP BRADENTON FL

1.1 TITLE
1.2 NAME **Mr. Werner H. LeVan**
1.3 STREET ADDRESS **P.O. Box 1013**
1.4 CITY - ST - ZIP **Oneco, FL 34264** *7A*

TITLE D
NAME CARROLL, LEROY
STREET ADDRESS 5328-3RD ST. CT., W.
CITY - ST - ZIP BRADENTON FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE CD
NAME PARENT, MARGARET
STREET ADDRESS 2219 51ST AVE E.
CITY - ST - ZIP BRADENTON FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE D
NAME ROYAL, MAJORIE
STREET ADDRESS 5320 24TH CT E
CITY - ST - ZIP BRADENTON FL 34203

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE D
NAME ROSS, R.
STREET ADDRESS 3608 34TH AVE DR W.
CITY - ST - ZIP BRADENTON, FL 00000

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE D
NAME BRADBURY, J H
STREET ADDRESS 4220 76TH ST W
CITY - ST - ZIP BRADENTON, FL 00000

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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 110.07(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: MARGARET W. PARENT *Margaret W. Parent 1.31.95*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date
(813) 755-4478