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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # 718105

1. Corporation Name

OLGA-FORT MYERS SHORES UNITED METHODIST CHURCH

Principal Place of Business

14036 MATANZAS DR
FT. MYERS FL 33905-2236

Mailing Address

14036 MATANZAS DR
FT. MYERS FL 33905-2236



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

02/06/1970

4. FEI Number

59-2422755

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

9. Name and Address of Current Registered Agent

WISE, STANLEY
14949 RANDOLPH DRIVE SE
FT MYERS FL 33905

10. Name and Address of New Registered Agent

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 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD
NAME SYVERSON, CARL
STREET ADDRESS 13026 9TH ST SE
CITY-ST-ZIP FT MYERS FL

DELETE

TITLE VCD
NAME MCCOLLUM ED
STREET ADDRESS 13820 RIVER FOREST DRIVE SE
CITY-ST-ZIP FT-MYERS-FL

DELETE

TITLE CT
NAME RALPH CLEAR
STREET ADDRESS 2840 PARKER AVE SE
CITY-ST-ZIP FT MYERS FL 33905

DELETE

TITLE VCT
NAME DON BURT
STREET ADDRESS 12301 RIVER RD SE
CITY-ST-ZIP FT MYERS FL 33905

DELETE

TITLE T
NAME FELTY, BETTY S
STREET ADDRESS 2220 SANTIAGO AVE SE
CITY-ST-ZIP FT MYERS FL

DELETE

TITLE VCD
NAME DOT BURT
STREET ADDRESS 12301 RIVER ROAD S/E
CITY-ST-ZIP FT-MYERS, FL 33905

DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

CT
ALTON VAN PATTON
2560 COLUMBUS ST.
FT. MYERS, FL. 33901

Change Addition

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

VCT
CLARK, LOEHR
2113 WENOLA CT.
FT. MYERS, FL. 33905

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:

Betty S. Felty

SIGNATURE REQUIRED

Date

4-28-99

Daytime Phone #

941-693-5377

CR2E037 (1/98)