FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # 7

719713

(0)

THE FIRST FREE METHODIST CHURCH OF THE PALM BEAC HES. INC.

FILED Feb 05 1998 8:00am Secretary of State

UE2	ING.			
Principal Place of Business Mailing Address				
3218 MELALEUCA DRIVE 3218 MELALEUCA DRIVE W PALM BEACH FL 33406 W PALM BEACH FL 33406				3. Date Incorporated or Qualified 11/18/1970
				4. FEI Number Applied For
				59-2277872 Not Applicable
	Place of Business	2a. Mailing Address		5. Certificate of Status Desired \$8.75 Additional
21		26		Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State		City & State	<u> </u>	7. Is this nonprofit corporation a homeowners association?
23		28		Yes No
Zip	Country	Zip	Country	This corporation owes or has paid the current year Intangible
24	25		30	Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
			81 Name	
BURGESS, GERALD			82 Street	Address (P.O. Box Number is Not Acceptable)
13321 ROLLING GREEN ROAD			83	
N. PALM BEACH FL 33408			[65]	
			84 City	FL 85 Zip Code
11. Pursuar	nt to the provisions of Sections 617.05	502 and 617.1508, Florida Statute	s, the above-named	corporation submits this statement for the purpose of changing its registered
office of agent. I	r registered agent, or both, in the Sta am familiar with, and accept the obli	te of Florida. Such change was a igations of, Section 617.0503, Flo	iuthorized by the corp irida Statutes.	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	<u> </u>			
- 40	Signature, typed or printed name of registered a		Registered Agent signature	
12. TITLE	DIFFICERS A	ND DIRECTORS DELETE	13. 1.1 TOLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	BURGESS, GERALD		1.2 NAME	C comits C browners
STREET ADDRESS	JANA BALLING ABERN BA	ΔD	1.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH PALM BEACH FL	nu .	1.4 CITY-ST-ZIP	
TITLE	V	DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	CULP, DAVID		2.2 NAME	
STREET ADDRESS	1070 40407 7070 11		2.3 STREET ADDRESS	
CITY-ST-ZIP	ROYAL PALM BCH. FL		2. 4 CITY-ST-ZIP	
TITLE	8	☐ DELETE	3.1 TITLE	Change ' Addition
NAME	JUHLIN, DOROTHY		3.2 NAME	•
STREET ADDRESS	211 NORTH C STREET		3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL		3.4. CITY - ST - ZIP	
TITLE	D	☐ DELETE	4.1 TITLE	Change Addition
NAME	JACKSON, BRYAN		4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP	ROYAL PALM BEACH FL 33		4.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	5.1 TiTLE	☐ Change ☐ Addition
NAME	OTIS, MICHAEL		5.2 NAME	
STREET ADORESS			5.3 STREET ADDRESS	
CITY-ST-ZIP	LANTANA FL 33462	Dipriese	5.4 CITY - ST - ZIP	
TITLE	MEIDCANIAATED OADV	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	WEIDENHAMER, GARY		6.2 NAME	
STREET ADDRESS	1423 W. DURAL ST.		6.3 STREET ADDRESS	

14. I hereby certify that the information supplied with this filling 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.

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