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May 19 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 734149 (8)
1. Corporation Name
GEORGIANA UNITED METHODIST CHURCH, INC.



Principal Place of Business: 3925 S. TROPICAL TRAIL, MERRITT ISLAND FL 32952, US

Mailing Address: 3925 S. TROPICAL TRAIL, MERRITT ISLAND FL 32952, US

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields.

3. Date Incorporated or Qualified: 10/23/1975

4. FEI Number: 59-2113927

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. Is this nonprofit corporation a homeowners association? Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent: ATKINSON, JOHN L., 3925 WILD PINE LANE, MERRITT ISLAND FL 32952

10. Name and Address of New Registered Agent: CURRY JR, THOMAS B., 1255 LESLIE DRIVE, MERRITT ISLAND, FL 32952

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: *Thomas B. Curry Jr.* THOMAS B. CURRY JR. CHAIRMAN DATE: 5/4/98

12. OFFICERS AND DIRECTORS

TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	WARING, AVIS	
STREET ADDRESS	530 RAMSEY LANE	
CITY-ST-ZIP	MERRITT ISLAND FL	
TITLE	TRUS	<input checked="" type="checkbox"/> DELETE
NAME	STEELE, KEVIN	
STREET ADDRESS	830 CARAMBOLA DRIVE	
CITY-ST-ZIP	MERRITT ISLAND FL	
TITLE	TR	<input type="checkbox"/> DELETE
NAME	ATKINSON, JOHN L.	
STREET ADDRESS	3925 WILD PINE LANE	
CITY-ST-ZIP	MERRITT ISLAND FL	
TITLE	TVC	<input checked="" type="checkbox"/> DELETE
NAME	RAMON, MEA	
STREET ADDRESS	2350 PINEAPPLE PLACE	
CITY-ST-ZIP	MERRITT ISLAND FL	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	MUNSEY, WILLIAM	
STREET ADDRESS	2670 SYKES CREEK DRIVE	
CITY-ST-ZIP	MERRITT ISLAND FL	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	ELAM, BILL	
STREET ADDRESS	4325 STILLWATERS DRIVE	
CITY-ST-ZIP	MERRITT ISLAND FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	TR/C	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	CURRY, JR, THOMAS B.	
1.3 STREET ADDRESS	1255 LESLIE DR.	
1.4 CITY-ST-ZIP	MERRITT ISLAND, FL 32952	
2.1 TITLE	TR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	DEAN BUZZ	
2.3 STREET ADDRESS	600 MILFORD PT. ROAD	
2.4 CITY-ST-ZIP	MERRITT ISLAND, FL 32953	
3.1 TITLE	TR/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	SEYMOUR, HOPE	
3.3 STREET ADDRESS	7940 S. TROPICAL TRAIL	
3.4 CITY-ST-ZIP	MERRITT ISLAND, FL 32952	
4.1 TITLE	TR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	BELL, DARLENE	
4.3 STREET ADDRESS	3980 S. TROPICAL TRAIL	
4.4 CITY-ST-ZIP	MERRITT ISLAND, FL 32952	
5.1 TITLE	TR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	PAYNE, WALTER	
5.3 STREET ADDRESS	321 DORSAT DRIVE	
5.4 CITY-ST-ZIP	COCOA BEACH, FL 32931	
6.1 TITLE	TR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	REICHEL, DAN	
6.3 STREET ADDRESS	2285 BENT PINE	
6.4 CITY-ST-ZIP	MELBOURNE, FL 32955	

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.

SIGNATURE: *Thomas B. Curry Jr.* THOMAS B. CURRY JR. 4/1/98 (407) 267-2022

CR2E037 (10/97)