


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 09, 2004 8:00 am
Secretary of State

03-09-2004 90083 001 ***122.50

DOCUMENT # N14026

1. Entity Name
ST. PETER'S UNITED METHODIST FOUNDATION, INC.



Principal Place of Business Mailing Address

**12200 W FOREST HILL BLVD
WELLINGTON
WEST PALM BEACH FL 33414**

**12200 W FOREST HILL BLVD
WELLINGTON
WEST PALM BEACH FL 33414**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number Applied For

59-2671764 Not Applicable

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



MOORE CR2E037 (11/03)

6. Name and Address of Current Registered Agent

**SEVERSON, JOHN M.
BURNS & SEVERSON, P.A.
325 THIRD STREET
WEST PALM BEACH FL 33402**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	RICHTER, RAINER	
STREET ADDRESS	12200 W. FOREST HILL BLVD	
CITY - ST - ZIP	WELLINGTON FL 33414	
TITLE	D	<input type="checkbox"/> Delete
NAME	SULLIVAN, LARRY	
STREET ADDRESS	279 WRANGLEWOOD	
CITY - ST - ZIP	WELLINGTON WP	
TITLE	D	<input type="checkbox"/> Delete
NAME	SMITH, RONALD	
STREET ADDRESS	15068 OAK CHASE COURT	
CITY - ST - ZIP	WELLINGTON FL 33414	
TITLE	D	<input type="checkbox"/> Delete
NAME	CLOSE, TOM	
STREET ADDRESS	13639 EXOTICA LANE	
CITY - ST - ZIP	WELLINGTON FL 33414	
TITLE	D	<input type="checkbox"/> Delete
NAME	GERBINO, PETER	
STREET ADDRESS	13512 JONQUIL PL.	
CITY - ST - ZIP	WELLINGTON WP	
TITLE	D	<input type="checkbox"/> Delete
NAME	TREADWELL, KENNETH	
STREET ADDRESS	12200 W. FOREST HILL BLVD	
CITY - ST - ZIP	WELLINGTON FL 33414	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	12200 W. FOREST HILL BLVD.
CITY - ST - ZIP	WELLINGTON, FL 33414
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 2/20/04 561/743-5712

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #