

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 12 AM 9:14

DOCUMENT # **N19256** (9)

1. Corporation Name
FIRST UNITED METHODIST CHURCH OF FORT WALTON, IN C.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
103 FIRST STREET, S.E. 103 FIRST STREET, S.E.
FORT WALTON BEACH FL 32548-2893 FORT WALTON BEACH FL 32548-2893

3. Date Incorporated or Qualified **02/16/1987** 3a. Date of Last Report **05/01/1994**

4. FEI Number **59-0939948** Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address

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

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

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

22. City & State 27. City & State

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

23. Zip Country 28. Zip Country

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

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

9. Name and Address of Current Registered Agent
DOWLING, JAMES R.
228 SANTA ROSA ST., S.W.
FT. WALTON BEACH FL 32548

10. Name and Address of New Registered Agent
81 Name **MALCOLM F. HAYLES**
82 Street Address (P.O. Box Number is Not Acceptable) **117 WAYNELL CIRCLE SE**
83
84 City **FORT WALTON BEACH** FL 85 Zip Code **32548**

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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 *Malcolm F. Hayles* **MALCOLM F. HAYLES** **6/2/95**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOWLING, JAMES R.	12 NAME	
STREET ADDRESS	228 SANTA ROSA ST., S.W.	13 STREET ADDRESS	
CITY - ST - ZIP	FORT WALTON BEACH FL	14 CITY - ST - ZIP	
TITLE	T	21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARY HUNTER	22 NAME	GARY HUNTER <u>DELETE</u>
STREET ADDRESS	725 CLARK DRIVE	23 STREET ADDRESS	
CITY - ST - ZIP	FT. WALTON BEACH FL	24 CITY - ST - ZIP	
TITLE	T	31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LILY REVETTE	32 NAME	LILY REVETTE <u>DELETE</u>
STREET ADDRESS	151 JET DRIVE	33 STREET ADDRESS	
CITY - ST - ZIP	FT. WALTON BEACH FL	34 CITY - ST - ZIP	
TITLE	T	41 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KENDALL WALKER	42 NAME	KENDALL WALKER <u>DELETE</u>
STREET ADDRESS	61 LINCOLN DRIVE, N.E.	43 STREET ADDRESS	
CITY - ST - ZIP	FT. WALTON BEACH FL	44 CITY - ST - ZIP	
TITLE	T	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KROMER, STEVE	52 NAME	
STREET ADDRESS	910 RUE DE LA SAVOIE	53 STREET ADDRESS	
CITY - ST - ZIP	MARY ESTHER FL	54 CITY - ST - ZIP	
TITLE	T	61 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		62 NAME	MALCOLM F. HAYLES
STREET ADDRESS		63 STREET ADDRESS	117 WAYNELL CIRCLE SE
CITY - ST - ZIP		64 CITY - ST - ZIP	FORT WALTON BEACH FL 32548

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 119.07(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: *Malcolm F. Hayles* **MALCOLM F. HAYLES** 904-243-9292
Signature and typed or printed name of signing officer or director (Date) (Optional) (Type #)

N19256

FIRST UNITED METHODIST CHURCH OF FORT WALTON, INC
103 FIRST STREET, SE
FORT WALTON BEACH, FL 32548

DOCUMENT NUMBER N19256 (9)

ADDITIONAL LISTING OF TRUSTEES - 1995

T
DANETTE B. PRESCOTT
229 THERESA COURT
FORT WALTON BEACH, FL 32548

T
CHARLES C. O'NEAL
101 DRIFTWOOD AVENUE
FORT WALTON BEACH, FL 32548

T
SARAH P. WILLIAMS
108 OPP BOULEVARD
FORT WALTON BEACH, FL 32548

T
BETSY THOMAS
7031 FOREST SHORES DRIVE
MARY ESTHER, FL 32569

T
KEITH GIBB
408 SHERRY CIRCLE
FORT WALTON BEACH, FL 32548

T
WILLIS D. PORTER
17 ALEXANDRA PLACE SE
FORT WALTON BEACH, FL 32548