FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N19256

Corporation Name

FIRST UNITED METHODIST CHURCH OF FORT WALTON, IN C.

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

2. Principal Place of Business

Suite, Apt. #, etc.

21

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

26

103 FIRST STREET, S.E.

FORT WALTON BEACH FL 32548-2893

FILED Mar 03, 1999 8:00 am § Secretary of State

03-03-1999 90108 050 ****70.00



Applied For

3. Date Incorporated or Qualifed

02/16/1987

4. FEI Number

22		27					59-0939948		No	t Applicable	
City & State	9	City & St	ate						\$8.75	Additional	
23	٠				5.	5. Certifcate of Status Desired		Fee Required			
Zip	Country Zip Cou			untry		6.	Election Campaign Financing		\$5.00	May Be	
24	25	29	30				Trust Fund Contribution		Added t	o Fees	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
					81 Name						
O'NEAL, PATRICK					GIBB, Keith 82 Street Address (P.O. Box Number is Not Acceptable)						
42 LINWOOD RD, NE					408 Sherry Circle						
FORT WALTON BEACH FL 32547											
· ·					City		· · · · · · · · · · · · · · · · · · ·		85 Zip (ode	
					State City State State						
11. Discuss to the provisions of Sections 617 0502 and 617 1508. Florida Statutes the above named compration 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 FLATTE STATE 2-9-99											
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable.	(NOTE: Register	ad Agent	signature requ		einstating)	DATE			
12.	OFFICERS AI	ND DIRECTORS	13			/	ADDITIONS/CHANGES TO OF	FICERS AN			
TITLE	T	5	DELETE 1.1	TITLE	r	•			Change	XX Addition	
NAME	TOLAR, LEE		1.2	NAME	ļr	EWEY	, John			ļ	
STREET ADDRESS	610 OVERBROOK DR		1.3	STREET	ADDRESS /	8 Mag	gnolia Drive				
CITY-ST-ZIP	FORT WALTON BEACH FL		1.4	CITY-ST	-ZIP S	hali	mar, FL				
TITLE	T		DELETE 2.1	TITLE	ŋ	1			Change	Addition	
NAME	SPIVEY, MARGARET		2.2	NAME	I	RROW	SMITH, David				
STREET ADDRESS	619 NE POWELL DR		2.3	STREET.			iracle Strip Pkw	y, E.			
CITY-ST-ZIP	FT WALTON BEACH FL		2.4	CITY-ST			Walton Beach, FL	• :	<u> </u>		
TITLE	T		DELETE 3.1	TITLE	10	7			Change	XXAddition .	
NAME	ROBBINS, CLAY		3.2	NAME	F	OBER	TS, Bill				
STREET ADDRESS	911 CLOVERDALE CT		3.3	STREET.	ADDRESS]	.44 F	ulmar Circle, NE				
CITY-ST-ZIP	FT WALTON BEACH FL			CITY-ST	r-ZIP F	ort.	Walton Beach, FL				
TITLE	T	C	DELETÉ 4.1	TITLE	(1				Change	XXAddition	
NAME	LORENEZ, JUDY		4. 2	NAME	V	VALKE:	R, Billy				
STREET ADDRESS	1898 HEARTLAND DDR		4.3	STREET.			ountry Club Ave.				
CITY-ST-ZIP	FORT WALTON BEACH FL			CITY-ST	-ZIP I	ort	<u>Walton Beach, FL</u>				
TITLE	1	1	DELETE 5,1	TITLE	1				Change	XXAddition	
NAME	O'NEAL, PATRICK		5.2	NAME	1	LICHA	UER, Sandy			Ì	
STREET ADDRESS	42 LINWOOD ROAD NW		5.3	STREET			llcrest Drive				
CITY-ST-ZIP	FORT WALTON BCH FL			CITY ST	-ZIP S	hali	mar, FL				
TITLE	T	<u> </u>	DELETE 6.1	TITLE	ū				Change	XX Addition	
NAME	MCGRAIL, MICHAEL		6.2	NAME		SIBB.	Keith				
STREET ADDRESS	20 FOREST GROVE PLACE		6.3	STREET			herry Circle				
CITY-ST-ZIP	FT WALTON BCH FL		6.4	CITY-ST	-ZIP]	ort	Walton Beach, FL				

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, with all other like empowered.

SIGNATURE:

SISTEM QUIRE!

2.9.99

850.243.9292

CRZEUS/ (11/98)