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CORPORATION  
ANNUAL REPORT  
1995



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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 FEB 15 PM 3:19

DOCUMENT # **N19693 (3)**

1. Corporation Name  
**FAITH UNITED METHODIST CHURCH OF BRADENTON, INC.**

Principal Place of Business Mailing Address  
**7215 1ST AVENUE WEST BRADENTON FL 34209-2211**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>03/16/1987</b>	3a. Date of Last Report <b>01/21/1994</b>
4. FEI Number <b>59-2774379</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	<b>\$68.75</b> Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

21. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country	2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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9. Name and Address of Current Registered Agent

**CASEY, JOHN R  
3845 CORTEZ RD, W  
STE. 100  
BRADENTON FL 34210**

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>DC</b>	NAME <b>CORBIN, ROBERT</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>101 29TH STREET NW</b>	CITY-ST-ZIP <b>BRADENTON FL</b>	1.2 NAME	
TITLE <b>TD</b>	NAME <b>MACK, FREDERICK J.</b>	1.3 STREET ADDRESS	
STREET ADDRESS <b>2718 37TH STREET WEST</b>	CITY-ST-ZIP <b>BRADENTON FL</b>	1.4 CITY-ST-ZIP	
TITLE <b>DS</b>	NAME <b>TYSON, JEFF</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>2408 AVENUE C.</b>	CITY-ST-ZIP <b>BRADENTON BEACH FL</b>	2.2 NAME	
TITLE <b>D</b>	NAME <b>PAC, RICH</b>	2.3 STREET ADDRESS	
STREET ADDRESS <b>1120 76TH STREET NW</b>	CITY-ST-ZIP <b>BRADENTON FL</b>	2.4 CITY-ST-ZIP	
TITLE <b>D</b>	NAME <b>MULFORD, HOWARD</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>1204 76TH ST NW</b>	CITY-ST-ZIP <b>BRADENTON FL</b>	3.2 NAME	
TITLE <b>D</b>	NAME <b>LOWERY, JUANINE</b>	3.3 STREET ADDRESS	
STREET ADDRESS <b>4907 29TH AVENUE W</b>	CITY-ST-ZIP <b>BRADENTON FL</b>	3.4 CITY-ST-ZIP	
TITLE <b>D</b>	NAME <b>DAUGHTREY, CYNTHIA</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>7401 2ND AVE NW</b>	CITY-ST-ZIP <b>BRADENTON FL 34209</b>	4.2 NAME	
TITLE	NAME	4.3 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	5.2 NAME	
TITLE	NAME	5.3 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	6.2 NAME	
TITLE	NAME	6.3 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	6.4 CITY-ST-ZIP	

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 118.07(9)(A), Florida Statutes. I further certify that the information included 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Frederick J. Mack **FREDERICK J. MACK** 2/9/95 813-794-8067  
Signature and typed or printed name of signing officer or director Date Telephone #