

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

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

3. Date Incorporated or Qualified **03/16/1987** 3a. Date of Last Report **02/15/1995**
4. FEI Number **59-2774379** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
**CASEY, JOHN R
3645 CORTEZ RD, W
STE. 100
BRADENTON FL 34210**

10. Name and Address of New Registered Agent
81 Name **Casey, John R.**
82 Street Address (P.O. Box Number is Not Acceptable) **6220 Manatee Ave., W**
83
84 City **Bradenton** FL 85 Zip Code **34209**

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: *[Signature]*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)
DATE: **4/25/96**

12. OFFICERS AND DIRECTORS

TITLE	DC	<input checked="" type="checkbox"/> DELETE
NAME	CORBIN, ROBERT	
STREET ADDRESS	101 29TH STREET NW	
CITY-ST-ZIP	BRADENTON FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	MACK, FREDERICK J.	
STREET ADDRESS	2718 37TH STREET WEST	
CITY-ST-ZIP	BRADENTON FL	
TITLE	DS	<input checked="" type="checkbox"/> DELETE
NAME	TYSON, JEFF	
STREET ADDRESS	2408 AVENUE C.	
CITY-ST-ZIP	BRADENTON BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PAC, RICH	
STREET ADDRESS	1120 76TH STREET NW	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MULFORD, HOWARD	
STREET ADDRESS	1204 76TH ST NW	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DAUGHTREY, CYNTHIA	
STREET ADDRESS	7401 2ND AVE NW	
CITY-ST-ZIP	BRADENTON FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Juanine Lowery	
1.3 STREET ADDRESS	4907 29th Ave., W	
1.4 CITY-ST-ZIP	Bradenton, FL 34209	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	DS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Bruce Neufeld	
3.3 STREET ADDRESS	3962 75th St., W #702	
3.4 CITY-ST-ZIP	Bradenton, FL 34209	
4.1 TITLE	DV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Rich Pac	
4.3 STREET ADDRESS	1120 76th St., NW	
4.4 CITY-ST-ZIP	Bradenton, FL 34209	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Eugene Stanley	
5.3 STREET ADDRESS	303 62nd St., NW	
5.4 CITY-ST-ZIP	Bradenton, FL 34209	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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 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: *[Signature]* **04-25-96** (941) 792-1836
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (12/95)