

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2001 8:00 am
Secretary of State

02-19-2001 90047 050 ****61.25

0023743

DOCUMENT # N24522
 1. Entity Name
THE FIRST UNITED METHODIST CHURCH OF OVIEDO, INC

Principal Place of Business 263 KING STREET OVIEDO FL 32765	Mailing Address 263 KING STREET OVIEDO FL 32765
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2. Principal Place of Business	3. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State		
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1350104	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**POWERS, JOHN
263 KING STREET
OVIEDO FL 32765**

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.

SIGNATURE *John Powers* **2/13/01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV PUTNAM, ROBERT 955 DYSON DR. WINTER SPRINGS FL 32708	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS VAIL, LINDA 10 VILLIAGE DR. OVIEDO FL 32765	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ABASCAL, ROBERT 2848 LEXINGTON CT. OVIEDO FL 32765-8465	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVENPORT, DEAN 4080 LAKE HARNEY CIR GENEVA FL 32732-9651	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD RADKEVICH, TOM 879 ROYALWOOD LANE OVIEDO FL 32765	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLACKMAN, LINDA 16 VLLIAGE DR. OVIEDO FL 32765-8516	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V Sauter, Jon 1011 Birkdale Trail Winter Springs, FL 32708	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Blackmon, Linda	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Tom Radkevich* **2/13/01** **736-8040**
Signature and Title or Printed Name of Signing Officer or Director Date Daytime Phone #

Tom Radkevich, Chairman, Board of Trustees

CR2E037 (10/00)

N24522

2001 Uniform Business Report

Those listed below are all "Directors"

Barbara Estevez
705 Canadice Lane
Winter Springs, FL 32708

Linda Gibb
2554 Ekana Drive
Oviedo, FL 32708

Hugh Wilson
1066 Black Acre Trail
Winter Springs, FL 32708