

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 # N30091 (5)

1. Corporation Name

FIRST UNITED METHODIST CHURCH OF WINTER GARDEN,
INC.



Principal Place of Business

Mailing Address

C/O WILLIAM N. ASMA
886 SOUTH DILLARD STREET
WINTER GARDEN FL 34787-3910

C/O WILLIAM N. ASMA
886 SOUTH DILLARD STREET
WINTER GARDEN FL 34787-3910

3. Date Incorporated or Qualified
01/09/1989

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

4. FEI Number
59-0725543

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ASMA, WILLIAM N.
886 SOUTH DILLARD STREET
WINTER GARDEN FL 32787

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

William N. Asma
Signature, typed or printed name of registered agent and title if applicable

William N. Asma

(NOTE: Registered Agent signature required when reinstating)

2-6-96

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE
NAME YOUNGLOOD, GARY
STREET ADDRESS 165 EAST TILDEN ST.
CITY-ST-ZIP WINTER GARDEN FL

TITLE VD ☐ DELETE
NAME AUGUSTINE, EDWARD L
STREET ADDRESS 10462 CE 561A
CITY-ST-ZIP CLERMONT FL 34711

TITLE S ☐ DELETE
NAME GLASSBURN, PATRICIA
STREET ADDRESS 1424 SPRING RIDGE CIRCLE
CITY-ST-ZIP WINTER GARDEN FL 34787

TITLE D ☐ DELETE
NAME STARLING, KENITH J.
STREET ADDRESS 9329 LAKE LOTTA CIR.
CITY-ST-ZIP GOTH A FL 34734

TITLE D ☐ DELETE
NAME HEATH, DONALD
STREET ADDRESS 660 GLENVIEW DR.
CITY-ST-ZIP WINTER GARDEN FL 34787

TITLE D ☒ DELETE
NAME CLAFLIN, LEE ANN
STREET ADDRESS 511 N. MAIN ST.
CITY-ST-ZIP WINTER GARDEN FL 34787

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME Timothy Keating
1.3 STREET ADDRESS 1236 Landing Dr.
1.4 CITY-ST-ZIP Ocoee, FL 34761

2.1 TITLE VD ☐ Change ☐ Addition
2.2 NAME Augustine, Edward L
2.3 STREET ADDRESS 10462 CR 561A
2.4 CITY-ST-ZIP Clermont, FL 34711

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE D ☒ Change ☐ Addition
6.2 NAME Quesinberry, Gloria
6.3 STREET ADDRESS 900 W. Plant St
6.4 CITY-ST-ZIP Winter Garden, FL 34787

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) as an attachment with an address.

SIGNATURE:

Timothy Keating
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-10-96

DATE

(407) 877-9198

Daytime Phone

CR2E037 (12/95)