

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 # N32828 (8)

1. Corporation Name

MIDDLEBURG UNITED METHODIST CHURCH, INC.



Principal Place of Business

Mailing Address

**3925 MAIN STREET
MIDDLEBURG FL 32068**

**3925 MAIN STREET
MIDDLEBURG FL 32068**

3. Date Incorporated or Qualified
06/14/1989

3a. Date of Last Report
01/30/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1320369

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

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**EDGERLY, CHARLES
89 YUCCA ST.
MIDDLEBURG FL 32068**

81

Name

EDWARD L. Shields

82

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

1542 SURREY GLEN COVE

83

84

City

MIDDLEBURG

FL

85

Zip Code

32068

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

Edward L. Shields

January 26, 1996

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	EDGERLY, CHARLES	
STREET ADDRESS	89 YUCCA ST.	
CITY - ST - ZIP	MIDDLEBURG FL 32068	
TITLE	VD	☒ DELETE
NAME	MCDONALD, GORDON	
STREET ADDRESS	2092 LAUREL DR.	
CITY - ST - ZIP	MIDDLEBURG FL 32068	
TITLE	SD	☒ DELETE
NAME	FARNSWORTH, TRICIA	
STREET ADDRESS	1988 TACOMA DR.	
CITY - ST - ZIP	MIDDLEBURG FL 32068	
TITLE	D	☒ DELETE
NAME	RAPER, DOUG	
STREET ADDRESS	2420 HALPERNS WAY	
CITY - ST - ZIP	MIDDLEBURG FL 32068	
TITLE	D	☐ DELETE
NAME	WHITE, EARL	
STREET ADDRESS	2065 CORNEL RD	
CITY - ST - ZIP	MIDDLEBURG FL	
TITLE	D	☒ DELETE
NAME	ROPIAK, ELLEN	
STREET ADDRESS	4121 BUDINGTON'S LANDING CT	
CITY - ST - ZIP	MIDDLEBURG FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☒ Addition
1.2 NAME	EDWARD L. Shields	
1.3 STREET ADDRESS	1542 Surrey Glen Cove	
1.4 CITY - ST - ZIP	Middleburg, FL 32068	
2.1 TITLE	VD	☐ Change ☒ Addition
2.2 NAME	DENVER BREWER	
2.3 STREET ADDRESS	3999 BRONCO ROAD	
2.4 CITY - ST - ZIP	MIDDLEBURG, FL. 32068	
3.1 TITLE	SD	☒ Change ☐ Addition
3.2 NAME	ELLEN ROPIAK	
3.3 STREET ADDRESS	4121 BUDINGTON'S LANDING CT.	
3.4 CITY - ST - ZIP	Middleburg, FL. 32068	
4.1 TITLE	D	☐ Change ☐ Addition
4.2 NAME	WHITE, EARL	
4.3 STREET ADDRESS	2065 CORNEL RD	
4.4 CITY - ST - ZIP	Middleburg, FL. 32068	
5.1 TITLE	D	☒ Change ☐ Addition
5.2 NAME	FARNSWORTH, TRICA	
5.3 STREET ADDRESS	1988 TACOMA DRIVE	
5.4 CITY - ST - ZIP	Middleburg, FL. 32068	
6.1 TITLE	D	☐ Change ☒ Addition
6.2 NAME	McLendon, Scott	
6.3 STREET ADDRESS	1696 Eagles Nest Lane	
6.4 CITY - ST - ZIP	Middleburg, FL. 32068	

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: *Edward L. Shields* **EDWARD L. Shields** **1/26/96** **904-282-0893**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E037 (12/95)