## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # N49835

(4)

ST. ANDREW UNITED METHODIST CHURCH, INC.

	•		•		
Principal Place of Business Mailing Address				T SOUTHER BUT BOOK TOLD AND AND THE BLOCK OLD STATE AND	
2001 W. 11TH STREET 2001 W. 11TH STREET PANAMA CITY FL 32401 PANAMA CITY FL 32401-1820			)		
					3. Date Incorporated or Qualified
2. Principal Pl	ace of Business	2a. Mailing Address 26			4. FEI Number Applied For Not Applied
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired See Regulred
City & State	)	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	1	8. This corporation has liability for intangible tax under s. 199.032,
24	25 9. Name and Address of Curre		30]		Florida Statutes Yes No 10. Name and Address of New Registered Agent
	8, INDITIO ADDITIONS OF COLLEGE	allt Hagistelen Agelit	81	Name	
_				<u> </u>	
MCQUAGGE, JOE # &- 1208 FORTUNE AVE			82	Stree	et Address (P.O. Box Number is Not Acceptable)
PANAMA		83	1		
			84	City	<b>85</b> Zip Code
		00 - 1042 4600 EL - 1 - 01-1 - 01-1		<u> </u>	ed 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 tamiffar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  (NOTE: Registered Agent signature required when reinstating)  DATE					
12.		ND DIRECTORS	13.	en e Pran	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CTR	DELETE	1.1 TITLE		Change Addition
NAME	MCQUAGGE, JOE		1.2 NAME		
STREET ADDRESS	1208 FORTUNE AVE		1.3 STREE	T ADDRESS	s
CHTY - ST - ZIP	PANAMA CITY FL		1.4 CITY-	ST-ZIP	
TITLE	STR	DELETE	2.1 TITLE		STR Addition
NAME	ALLEN, DOT		22 NAME		RICK FULTON S 3115 W 30TH CT.
STHEET ADDRESS	1604 ARTHUR AVE		2.3 STREE		
CITY+ST-ZIP TITLE	PANAMA CITY FL VPTR	DELETE	2. 4 CITY- 3.1 TITLE	ST-ZIP	PANOMA CITY, F2 37405
NAME	OLMSTEAD, CHARLES	AND DESCRIP	3.2 NAME		DOVID BILEY
STREET ADDRESS	2873 TUPELO		3.3 STREE	T ADDRESS	S 2874 TUPEID URIVE
CITY-ST-ZIP	PANAMA CITY FL		3.4. CITY-		Pontomo City, FZ-32405
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREE	T ADDRESS	S .
CHY-ST-ZIP		051575	4.4 CITY-	ST-ZIP	
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE 5.4 CITY-		)3
CHY-ST-ZIP TITLE		☐ DELETE	61 TITLE	01-4IF	☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREE		ss
CITY-S1-ZIP			64 C/TY-		
14. Ldo herek	by certify that the information supplied indicated on this appual report of	lied with this filing does not qualify	y for the ex-	emption	n stated in Section 119.07(3)(i), Florida Statutes. I further certify that the and that my signature shall have the same legal effect as if made under cath; that
Lam an o	fficer or director of the corporation n Block 12 or Block 13 if changed,	or the receiver or trustee empower	ered to exe	cute thi	is report as required by Chapter 617, Florida Statutes; and that my name

SIGNATURE AND TYPED ON BEINTED HANDADE SIGNATURE AND TYPED ON BEINTED HANDADE SIGNATURE OFFICER OR DIRECTOR

**FILED** 

Feb 28 1997 8:00am

Secretary of State

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