

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 15, 2001 8:00 am**  
**Secretary of State**

03-15-2001 90194 014 \*\*\*\*61.25

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**DOCUMENT # 709897**

1. Entity Name

**EAST NAPLES UNITED METHODIST CHURCH, INC.**

Principal Place of Business

2701 AIRPORT ROAD SOUTH  
 NAPLES FL 34112  
 US

Mailing Address

2701 AIRPORT ROAD SOUTH  
 NAPLES FL 00002  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

34112

4. FEI Number

59-2171834

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~REEVES, CLETUS~~  
~~788 BELVILLE BLVD~~  
~~NAPLES, FL~~  
~~NAPLES FL 34104~~

7. Name and Address of New Registered Agent

Name

JAMES L. LUTHER

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

212 PALMETTO DUNES CIR

City

NAPLES

FL

Zip Code

34113

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

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. ☐

**\$5.00 May Be  
 Added to Fees**

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE PC  
 NAME REEVES, CLETUS ☒ Delete  
 STREET ADDRESS 788 BELVILLE BLVD  
 CITY-ST-ZIP NAPLES FL 34104-7892

TITLE D  
 NAME GILL, ELIZABETH ☒ Delete  
 STREET ADDRESS 3142 CROWN POINT BLVD  
 CITY-ST-ZIP NAPLES FL 34112

TITLE D  
 NAME RATLIFF, CLIFF ☐ Delete  
 STREET ADDRESS 5280 MYRTLE LANE  
 CITY-ST-ZIP NAPLES FL

TITLE D  
 NAME JORDAN, JOHN ☐ Delete  
 STREET ADDRESS 269 BALTUSUROL DR  
 CITY-ST-ZIP NAPLES FL 34113

TITLE V  
 NAME LEHMAN, HENRY ☒ Delete  
 STREET ADDRESS 2803 ANITREE LANE, F102  
 CITY-ST-ZIP NAPLES FL 34113-8583

TITLE S  
 NAME LUTHER, JAMES L ☐ Delete  
 STREET ADDRESS 212 PALMETTO DUNES CIRCLE  
 CITY-ST-ZIP NAPLES FL 34113

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition  
 NAME BIRKHOFF, BOB  
 STREET ADDRESS 4628 CHIPPENDALE DRIVE  
 CITY-ST-ZIP NAPLES, FL 34112-5259

TITLE S ☐ Change ☒ Addition  
 NAME WILLIAMS, LINDA  
 STREET ADDRESS 424 FOX DEN CIRCLE  
 CITY-ST-ZIP NAPLES, FL 34104-5182

TITLE D ☐ Change ☒ Addition  
 NAME SHANNON, EVELYN  
 STREET ADDRESS 3170 PINEAPPLE CT  
 CITY-ST-ZIP NAPLES, FL 34120-1467

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE C ☒ Change ☐ Addition  
 NAME LUTHER, JAMES L.  
 STREET ADDRESS 212 PALMETTO DUNES CIR.  
 CITY-ST-ZIP NAPLES, FL 34113-7566

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 empowerment.

SIGNATURE:

SIGNATURE REQUIRED

3/12/2001 (94) 774-1323

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)