

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90511 035 ****61.25

DOCUMENT # 769129

1. Entity Name

COLLEGE HEIGHTS UNITED METHODIST CHURCH, INC.



Principal Place of Business

**942 SOUTH BLVD.
LAKELAND FL 33803
US**

Mailing Address

**942 SOUTH BLVD.
LAKELAND FL 33803
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-0668475**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GARRETT, HOWARDENE G
1911 CHEROKEE TRAIL
LAKELAND FL 33803**

Name **George Stough**
Street Address (P.O. Box Number is Not Acceptable)
1057 Colony Park
City **Lakeland** FL Zip Code **33813-2868**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*
Signature, typed or printed name of registered agent and title if applicable.

George Stough
(NOTE: Registered Agent signature required when reinstating)

4/23/03
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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **G/D** ☐ Delete
NAME **BESWICK, ROBERT**
STREET ADDRESS **412 E BELVEDERE ST**
CITY-ST-ZIP **LAKELAND FL 33803**

TITLE **D** ☒ Change ☐ Addition
NAME **D**
STREET ADDRESS **D**
CITY-ST-ZIP **D**

TITLE **VC/D** ☒ Delete
NAME **HUNTER, RICHARD**
STREET ADDRESS **746 S MISSISSIPPI AVE**
CITY-ST-ZIP **LAKELAND FL 33801**

TITLE **T** ☒ Change ☐ Addition
NAME **Suzanne Aycock**
STREET ADDRESS **1428 Stella Ct**
CITY-ST-ZIP **Lakeland FL 33813**

TITLE **D** ☒ Delete
NAME **ALDERMAN, DALE**
STREET ADDRESS **4108 RICE RD**
CITY-ST-ZIP **PLANT CITY FL 33566**

TITLE **D** ☒ Change ☐ Addition
NAME **Howardene Garrett**
STREET ADDRESS **1911 Cherokee Trail**
CITY-ST-ZIP **Lakeland FL 33803**

TITLE **D** ☐ Delete
NAME **JUCHAU, CAROL**
STREET ADDRESS **2303 CAMBRIDGE AVE**
CITY-ST-ZIP **LAKELAND FL 33803**

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

TITLE **S/D** ☒ Delete
NAME **WARD, SUZANNE**
STREET ADDRESS **311 S ELM RD**
CITY-ST-ZIP **LAKELAND FL 33801**

TITLE **D** ☒ Change ☐ Addition
NAME **Jim Arnold**
STREET ADDRESS **2425 Narden Blvd #223**
CITY-ST-ZIP **Lakeland FL 33803**

TITLE **D** ☒ Delete
NAME **DINSMORE, BILL**
STREET ADDRESS **915 OAKHILL ST**
CITY-ST-ZIP **LAKELAND FL 33815**

TITLE **D** ☒ Change ☐ Addition
NAME **Sarah McKay**
STREET ADDRESS **2214 Collins Lane**
CITY-ST-ZIP **Lakeland FL 33803-2324**

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, 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 607, 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:

[Signature] **Suzanne Aycock** **4/23/03**
Doug Hallman **4/23/03**

CR2E037 (10/02)