

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706094

Entity Name: PORT CHARLOTTE UNITED METHODIST CHURCH, INC.**Current Principal Place of Business:**21075 QUESADA AVE
PORT CHARLOTTE, FL 33952**Current Mailing Address:**21075 QUESADA AVE
PORT CHARLOTTE, FL 33952 US**FEI Number: 59-1022083****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BURR, ROBERT O JR.
2116 ONONDAGA LANE
PUNTA GORDA, FL 33983 US*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:** ROBERT O. BURR, JR.

02/06/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name SNIECINSKI, ROMAN M
Address 2642 ATWATER DRIVE
City-State-Zip: NORTH PORT FL 34288

Title SEC
Name FLETCHER, DORIS J
Address 21442 LANDIS AVENUE
City-State-Zip: PORT CHARLOTTE FL 33954

Title DIRECTOR
Name COX, DAVID SR.
Address 21507 CHIPMAN AVE.
City-State-Zip: PORT CHARLOTTE FL 33954

Title VP
Name WILCEK, JOSEPH
Address 2601 DENICKE STREET
City-State-Zip: NORTH PORT FL 34286

Title DIRECTOR
Name WEST, WILLIAM F
Address 17376 HARRIS AVENUE
City-State-Zip: PORT CHARLOTTE FL 33948

Title DIRECTOR
Name HALD, MICHAEL
Address 660 MYRA LANE
City-State-Zip: PORT CHARLOTTE FL 33948

Title DIRECTOR
Name DO, HUNG
Address 21163 MEEHAN AVENUE
City-State-Zip: PORT CHARLOTTE FL 33952

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ROMAN M. SNIECINSKI

PRESIDENT

02/06/2014

Electronic Signature of Signing Officer/Director Detail

Date