

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713758

FILED
Mar 22, 2018
Secretary of State
CC4973202982

Entity Name: FIRST UNITED METHODIST CHURCH OF LAKE ALFRED, INC.

Current Principal Place of Business:

130 S PENNSYLVANIA AVENUE
LAKE ALFRED, FL 33850

Current Mailing Address:

P O BOX 1227
LAKE ALFRED, FL 33850 US

FEI Number: 59-2137410

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FREE, PHYLLIS
130 S PENNSYLVANIA AVENUE
LAKE ALFRED, FL 33850 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: PHYLLIS FREE

03/22/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TRUSTEE
Name KENT, MARY BELLE
Address P O BOX 1227
City-State-Zip: LAKE ALFRED FL 33850

Title TRUSTEE
Name BRAND, GARY
Address P O BOX 1227
City-State-Zip: LAKE ALFRED FL 33850

Title DIRECTOR
Name WALKER, TED
Address P O BOX 1227
City-State-Zip: LAKE ALFRED FL 33850

Title TREASURER
Name MENSER, DORA
Address P O BOX 1227
City-State-Zip: LAKE ALFRED FL 33850

Title PASTOR
Name THACKER, CATHY
Address P O BOX 1227
City-State-Zip: LAKE ALFRED FL 33850

Title CHAIRMAN
Name HINEGARDNER, BARBARA
Address P O BOX 1227
City-State-Zip: LAKE ALFRED FL 33850

Title SECRETARY
Name GORTE, ANNE
Address P O BOX 1227
City-State-Zip: LAKE ALFRED FL 33850

Title SECRETARY
Name FREE, PHYLLIS
Address P O BOX 1227
City-State-Zip: LAKE ALFRED FL 33850

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: PHYLLIS FREE

SECRETARY

03/22/2018

Electronic Signature of Signing Officer/Director Detail

Date