#### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19256

Entity Name: FIRST UNITED METHODIST CHURCH OF FORT WALTON, INC.

FILED
Jan 13, 2015
Secretary of State
CC8643012080

## **Current Principal Place of Business:**

103 FIRST STREET, S.E.

FORT WALTON BEACH FL 32548-2893

### **Current Mailing Address:**

103 FIRST STREET, S.E.

FORT WALTON BEACH FL 32548-2893 US

FEI Number: 59-0939948 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

RIVERS, RALPH F 109 HOWELL DRIVE, NW FORT WALTON BEACH, FL 32548 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

 Title
 TRUSTEE
 Title
 TRUSTEE

 Name
 SEVERSON, BRENT
 Name
 GATES, NEIL

Address 707 ST. CROIX COVE Address 815 WESTWOOD DRIVE

City-State-Zip: NICEVILLE FL 32578 City-State-Zip: FORT WALTON BEACH FL 32547

Title TRUSTEE Title TRUSTEE

Name STONE, JERRY Name THRALL, LARRY

Address 111 WOODBINE CIRCLE Address 504 MARLOWE DRIVE

City-State-Zip: FORT WALTON BEACH FL 32548 City-State-Zip: FORT WALTON BEACH FL 32547

Title TRUSTEE Title TRUSTEE

Name GARICK, CHRIS Name TODD, WILLIAM

Address 32 BAY DRIVE, SE Address 228 CREWILLA DRIVE, NW

City-State-Zip: FORT WALTON BEACH FL 32548 City-State-Zip: FORT WALTON BEACH FL 32548

Title TRUSTEE Title TRUSTEE

Name ROBBINS, CARL J Name ROBBINS, MERLE

Address 572 L'OMBRE CIRCLE Address 1186 CATHRIDGE TRCE

City-State-Zip: FORT WALTON BEACH FL 32547 City-State-Zip: FORT WALTON BEACH FL 32547

#### Continues on page 2

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: RALPH F. RIVERS TRUSTEE

Electronic Signature of Signing Officer/Director Detail

01/13/2015 Date

# Officer/Director Detail Continued:

Title TRUSTEE

Name RIVERS, RALPH

Address 109 HOWELL DR., NW

City-State-Zip: FORT WALTON BEACH FL 32548