## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006147

Entity Name: COMMUNITY UNITED METHODIST CHURCH OF LAKE COMO,

INC.

**Current Principal Place of Business:** 

126 HIGHLAND AVE LAKE COMO, FL 32112

**Current Mailing Address:** 

PO BOX 330

LAKE COMO, FL 32157

FEI Number: 59-3248364 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FORTIER, RICHARD P 102 CRESCENT LANE CRESCENT CITY, FL 32112 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

**FILED** Mar 10, 2014

**Secretary of State** 

CC2903528881

Officer/Director Detail:

Title Title D

Name FORTIER, RICHARD P Name BRITT, SANDRA

Address 102 CRESCENT LANE Address 239 E. BUFFALO BLUFF RD.

City-State-Zip: CRESCENT CITY FL 32112 City-State-Zip: SATSUMA FL 32189

Title SD Title TD

GIBBLE, EVELYN Name LAGROW, JANET Name Address 206 WHITE RD. Address 283 SISCO RD.

City-State-Zip: POMONA PARK FL 32181 City-State-Zip: CRESCCNT CITY FL 32112

Title Title D

Name MILLERE, JANE Name SPRAGUE, JUANITA Address PO BOX 243

PO BOX 212 Address City-State-Zip: POMONA PARK FL 32181

LAKE COMO FL 32157 City-State-Zip:

Title D.

ROBERT, SAYLER Name

Address PO BOX 62

City-State-Zip: LAKE COMO FL 32157

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: RICHARD P. FORTIER

**DIRECTOR** 

03/10/2014

Electronic Signature of Signing Officer/Director Detail

Date