

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 27, 2018
Secretary of State
CC9144253588

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: 59-3048364

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBERTS, CRAIG
143 ROOSTER RUN RD.
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: CRAIG ROBERTS **03/27/2018**

Electronic Signature of Registered Agent Date

Officer/Director Detail :

Title	D	Title	TD
Name	TREADWELL, LISA	Name	LAGROW, JANET
Address	PO BOX 123	Address	206 WHITE RD.
City-State-Zip:	LAKE COMO FL 32157	City-State-Zip:	CRESCCNT CITY FL 32112

Title	SD	Title	D
Name	GIBBLE, EVELYN	Name	BOWSER, DAN
Address	283 SISCO RD.	Address	323 SISCO RD.
City-State-Zip:	POMONA PARK FL 32181	City-State-Zip:	POMONA PARK FL 32181

Title	D	Title	D.
Name	FORTIER, MARY	Name	SAYLER, ROBERT
Address	102 CRESCENT LANE	Address	PO BOX 62
City-State-Zip:	CRESCENT CITY FL 32112	City-State-Zip:	LAKE COMO FL 32157

Title	CHAIRMAN
Name	ROBERTS, CRAIG
Address	143 ROOSTER RUN RD.
City-State-Zip:	CRESCENT CITY FL 32112

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: CRAIG ROBERTS **CHAIRMAN/D** **03/27/2018**

Electronic Signature of Signing Officer/Director Detail Date