#### 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001242

Entity Name: RUSKIN UNITED METHODIST CHURCH, INC.

FILED Feb 11, 2020 Secretary of State 6921025063CC

Date

# **Current Principal Place of Business:**

105 FOURTH AVENUE NW RUSKIN, FL 33570

### **Current Mailing Address:**

**PO BOX 745** 

RUSKIN, FL 33575

FEI Number: 59-0994487 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

MATSON, CURTIS 6225 FLAME TREE DRIVE APOLLO BEACH, FL 33572 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: CURTIS MATSON 02/11/2020

Electronic Signature of Registered Agent

Officer/Director Detail:

Name

Title LAY LEADER Title VICE CHAIRPERSON

ADMINISTRATIVE COUNCIL

Name MATSON, CURTIS Name WINDSOR, RON

Address 6225 FLAME TREE DRIVE
Address 1229 LYNDHURST GREENS DRIVE

City-State-Zip: APOLLO BEACH FL 33572

City-State-Zip: SUN CITY CENTER FL 33573

Title SECRETARY ADMINISTRATIVE

BABINEC, MARY

COUNCIL

Title OFFICER, ADMINISTRATIVE COUNCIL

Name HUNTER, MARY Name ALTER, FRANK

Address 206 ISLIP WAY Address 1405 6TH STREET SE

City-State-Zip: SLIN CITY CENTER FL 33573 City-State-Zip: RUSKIN FL 33570

City-State-Zip: SUN CITY CENTER FL 33573 City-State-Zip: RUSKIN FL 33570

Title TREASURER Title TRUSTEE CHAIRPERSON,
ADMINISTRATIVE COUNCIL

CHAIRPERSON

CHAIRPERSON

Address 9610 GLENPOINTE DR Name JEFFERY, CECILIA

City-State-Zip: RIVERVIEW FL 33569 Address 6732 MONARCH PARK DRIVE

City-State-Zip: APOLLO BEACH FL 33572

Title RUMC DAY CARE BOARD

Name RUPERT, MARK Title FINANCE CHAIRPERSON

Address 3903 SALIDA DEL SOL Name GRUBBS, JOYCE City-State-Zip: RUSKIN FL 33573 Address 2214 PIER DR

City-State-Zip: RUSKIN FL 33570

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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: MARY BABINEC TREASURER 02/11/2020

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

OFFICER ADMINISTRATIVE COUNCIL Title Title TRUSTEE

Name SWANEY, LARRY Name WILES, DAVID

504 FALKIRK COURT ~ UNIT A Address 3920 33RD STREET SE Address City-State-Zip: RUSKIN FL 33570 City-State-Zip: SUN CITY CENTER FL 33573

Title TRUSTEE Title TRUSTEE

Name LONG, CORA / BETTY Name SCHERER, GEORGE

Address P.O. BOX 1057 376 CEDAR FALLS DR Address

City-State-Zip: RUSKIN FL 33575 City-State-Zip: APOLLO BEACH FL 33572