

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 19, 1999 8:00 am
Secretary of State

02-19-1999 90013 005 ****61.25

DOCUMENT # 700773

1. Corporation Name

FOREST PARK METHODIST CHURCH, INC.

Principal Place of Business

1401 WEST 23RD STREET
PANAMA CITY FL 32405

Mailing Address

1401 WEST 23RD STREET
PANAMA CITY FL 32405



2. Principal Place of Business

1 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

04/08/1960

4. FEI Number

59-1272374

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

TAYLOR, KENNETH R. R
1401 W. 23RD ST.
PANAMA CITY FL 32405

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	T	MCINVALE, DONNA	☒ DELETE
NAME		4159 KIRKPATRICK RD.	
STREET ADDRESS		SOUTHPORT FL	
CITY-ST-ZIP			
TITLE	D	ADELAIDE, BRUMBACK	☐ DELETE
NAME		3172 WOOD VALLEY RD.	
STREET ADDRESS		PANAMA CITY FL	
CITY-ST-ZIP			
TITLE	D	ROBBINS, JOHN	☐ DELETE
NAME		2332 FOXWORTH	
STREET ADDRESS		PANAMA CITY FL	
CITY-ST-ZIP			
TITLE	P	HAMRICK, JOE	☐ DELETE
NAME		712 DRIFTWOOD LANE	
STREET ADDRESS		LYNN HAVEN FL	
CITY-ST-ZIP			
TITLE	D	SEABORN, PAT	☐ DELETE
NAME		1201 BREANAU TERRACE	
STREET ADDRESS		PANAMA CITY FL	
CITY-ST-ZIP			
TITLE	VP	KLINGER, JERRY	☐ DELETE
NAME		3027 JENKS AVE.	
STREET ADDRESS		PANAMA CITY FL	
CITY-ST-ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	T	Change ☐ Addition ☒
1.2 NAME	GRIFITH, HERBERT J.	
1.3 STREET ADDRESS	2317 MOULD AVE.	
1.4 CITY-ST-ZIP	PANAMA CITY, FL 32405	
2.1 TITLE		Change ☐ Addition ☐
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		Change ☐ Addition ☐
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		Change ☐ Addition ☐
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		Change ☐ Addition ☐
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		Change ☐ Addition ☐
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/99 850-785-6296
Date Daytime Phone #

CR2E037 (11/98)