FILE NOW:	FILING	FEE IS	\$61.	.25
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NONP	ROFIT
CORPO	RATION
ANNUAL	REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

(5)

DOCUMENT # 701089

ST. J	ohns united methodist	CHURCH, INC.					
Principal Pla	ace of Business	Mailing Address			1 100 ki kant edebi kidki ddiat	IDII OO OO OO OO OO OO	IBIN BIBN BIBN BIBN IBBN
5800 BEE A	RIDGE RD	5800 BEE RIDGE RD					
	FL 34233-1504	SARASOTA FL 34233-1504					
					 Date Incorporated or Qualifie 06/16/1960 	ed 3a. Date	of Last Report /23/1995
2. Principal	Place of Business	2a. Mailing Address					T
21		26			4. FEI Number 59-2466867		Applied For
Suite, Ap	it. #, etc.	Suite, Apt. #, etc.	 -	"			Not Applicable \$8.75 Additional
22		27			5. Certificate of Status Desired		Fee Required
City & Sta	ate	City & State			6. Election Campaign Financing	a	\$5.00 May Be
23		28			Trust Fund Contribution		Added to Fees
Z _I p	Country	Zip	Country		8. This corporation has liability		
24]	25 9. Name and Address of Curre	29 3	0		Florida Statutes	Yes No	
,	9 and	aur Liefligreiger Wheiir	81	Name	10. Name and Address of New	w Registered Age	ant
PEAIRS	S, RALPH				Peairs, Ralph		
	POTTER STREET		82	Street	Address (P.O. Box Number is Not Accept 6510 Goldfinch Street	otable)	
	SOLDFINCH STREET		83		OSTO COTALTHEI SCIE	=	
	OTA FL 34241						
			84	City	Sarasota,	3-1	34241
11. Pursuan	it to the provisions of Sections 617.050	02 and 617.1508, Florida Statutes, t	the above-n	named co	proporation submits this statement for the	purpose of changi	no its registered office
or regist familiar v	ered agent, or both, in the State of Flo with, and accept the obligations of, Sec	rida. Sugh change was authorized b ction 6:17.0503. Florida Statutes.	by the corpo	oration's	proporation submits this statement for the board of directors. I hereby accept the a	ippointment as reg	istered agent. I am
SIGNATURE	wind was	2111				3/	lor
	Signature, typed or printed name of registered ages	nt and title if applicable. (NOTE R	Registered Agent	signature re	equired when reinstating)	DATE	4/2
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO C	DEFICERS AND DIF	
	PEAIRS, RALPH	□ DELETE	11 TITLE		VD	□c	change Addition
NAME STREET ADDRESS	CEAN COLDENSOLI STORET		1.2 NAME		Talbot, Wayne		
CITY-ST-ZIP	SARASOTA FL		1.3 STREET		3931 Country View I		
TITLE	VD	Γ Ω DELETE	1.4 CITY - ST 2.1 TITLE	- ZIP	Sarasota, F1. 34233		
NAME	HANKINS, WILLIAM	LEDELLIC	2.1 HILE 2.2 NAME		D	[_]0	hange M Addition
STREET ADDRESS	74AF AARTAIN MIDD AVE		2.2 NAME 2.3 STREET A	*DDBCCC	Graham, Brian		
CITY-ST-ZIP	SARASOTA FL		2 4 CHY-S1		2220 Teal Ave.		<i>y</i>
TITLE	D	DOELETE	3.1 TITLE	1- ZIP	Sarasota, F1 34232 D	File	hange Addition
NAME	GLOTFELTY, NANCY	_	3.2 NAME		Wade, Karen		ប្រជាជិត 🔝 មកពល់ប្រ
STREET ADDRESS			3.3 STREET A	ADDRESS	2358 Black Oak Ct.		
CITY-ST-ZIP	SARASOTA FL		3.4 CITY-ST		Sarasota, F1. 34232	2	
TITLE	SD	DELETE	4.1 TITLE	1	D		hange Addition
NAME	SCHEIB, DOLLY		4. 2 NAME		Gibbons, Kathy	_	
STREET ADDRESS			4 3 STREET A	ADDRESS	3935 Defoe Square		
CITY-ST-ZIP	SARASOTA, FL 00000		4.4 CITY-ST	- 7IP	Sarasota, F1. 34241	<u>L</u>	
TITLE	DILLENDECK HADI AND	DELETE	5.1 TITLE		D	C	hange 🗹 Addition
NAME	DILLENBECK, HARLAND		5.2 NAME	1	Armstrong, Larry		
STREET ADDRESS	4011 WESTMINSTER DR SARASOTA FL		5.3 STREET A	ADDRESS	3728 71st Terrace E	i .	,
City-ST-ZiP	D SAMASUIA PL	TOPETE	5.4 CITY - ST-	- ZIP	<u>Sarasota, F1. 34243</u>	}	
TITLE	COLLINS, TERRY	□ ØELETE	61 TITLE		D D	□ Cr	hange 🔽 Addition
NAME STORE LABORESO	AAAA BOUIDENIOE BB		62 NAME		Dibler, John		
STREET ADDRESS	OUTO I HODEROE DR	3	6.3 STREET A	INDRESS 1	3718 Malec Cir.		
CITY-ST-ZIP	SARASOTA FL	1	O.S DINCELLY	DD TEGG	Sarasota, F1. 34233		

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 exporation 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 prianged, or on an attachment with an address

SIGNATURE: SIGNATURE SIGNATURE AND TYPEGOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/96 941-371-112-7

CR2E037 (12/95)