1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## **DOCUMENT # 701150**

1. Corporation Name

## THE FIRST UNITED METHODIST CHURCH OF EUSTIS, INC

Principal Place of Business	
-THE- 600 South Grove St Eustis Fl 32726	

Mailing Address

-THE-

600 SOUTH GROVE ST EUSTIS FL 32726

## FILED Mar 11, 1999 8:00 am § Secretary of State

03-11-1999 90101 040 \*\*\*\*61.25

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2. Principal Pi	al Place of Business 2a. Mailing Address		3. Date incorporated or Qualife	d				
21		26			07/01/1960			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number		- <del> </del>	olied For
22		27			70-1150450			Applicable
City & State	e	City & State			5. Certificate of Status Desired		\$8.75 A	
23		28			or consider of		Fee Rec	Juired
Zip	Country	Zip	Country		6. Election Campaign Financing	<b>7</b>	\$5.00 h	
24	25	29 3	0		Trust Fund Contribution		Added to	Fees
	9. Name and Address of Current	Registered Agent	- 04	L N1	10. Name and Address of New	Registered /	-tgent	
			81	Name			•	1
BOYER, R	ev. William j		82	Street /	Address (P.O. Box Number is Not Accep	otable)		
1015 LAKE	GRACIE DR			L				
EUSTIS FL	. 32726		83					
	•		84	City			85 Zip C	ode
						FL		
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes	, the above	e-named	corporation submits this statement for the oration's board of directors. I hereby acc	e purpose of a	changing its rec	egistered istered
agent. I a	egistered agent, or both, in the State of the fight of the miliar with, and accept the obligation of the contract of the contr	ons of, Section 617.0503, Florid	la Statutes		Mation a board of directors. Thereby ass	op. mo oppon		
SIGNATURE								
	Signature, typed or printed name of registered agent	**** **		nt signature re	equired when reinstating)	DATE	5 BIDEOTOI	DC (N) 40
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO C	FFICERS AN	Change	Addition
TITLE	T	☐ DELETE	1.1 TITLE		T		☐ ¢ilatige	LT VOOIDON
NAME	BAXTER, KEITHA		1.2 NAMÉ		Joe Wolfer			
STREET ADDRESS	126-A SHADY LANE		1.3 STREE	TADDRESS	1245 S Putney Ct			
CITY-ST-ZIP	EUSTIS FL		1.4 CITY-S	T-ZIP	Leesburg, FL	·		( A J J ) ( A J ) ( A J )
TITLE	TV	☐ DELETE	2.1 TITLE		T		Change	☐ Addition
NAME	GOOCH, CARMEN		2.2 NAME		John Rimmer			}
STREET ADDRESS	s 103 BURRELL RD. 23 ST		2.3 STREE	TADDRESS	2744 Bayview Dr			
CITY-ST-ZIP	EUSTIS FL		2. 4 CITY-5	ST-ZIP	Eustis, FL			
TITLE	Τ	☐ DELETE	3.1 TITLE		T	~	Change -	- 🖸 Addition
NAME	MORRISON, RICHARD		3.2 NAME		Sid Tomlinson			
STREET ADDRESS	2599 COUNTRY-CLUB RD		3.3 STREE	T ADDRESS	502 W Woodward Ave			
CITY-ST-ZIP	EUSTIS FL		3.4. CITY- S	ST-ZIP	Eustis, FL	***	<del></del>	
TITLE	T	DELETE	4.1 TITLE		T _		Change	☐ Addition
NAME	PECK, WILLIAM		4. 2 NAME		Raymond Fritz	_		
STREET ADDRESS	12552 WEDGEFIELD DR		4.3 STREE	T ADDRESS	2650 Orange Branch R	.d		
CITY-ST-ZIP	GRAN ISLAND FL		4.4 CITY-S	T-ZIP	Eustis, FL			
TITLE	TC	☐ DELETE	5.1 TITLE				☐ Change	☐ Addition
NAME	CARTER, ROBERT		5.2 NAME					
STREET ADDRESS			5.3 STREE	TADDRESS				
CITY-ST-ZIP	GRAND ISLAND FL		5.4 CITY-S	T-ZIP				
TITLE	T	DELETE	6.1 TITLE				Change	☐ Addition
NAME	LEHEUP, WILLIAM		6.2 NAME					
STREET ADDRESS	434 E. LEMON AVE.		6.3 STREE	T ADDRESS				
	CHICTIC CI		64 CITY-S	T. 71P				

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

3/10/99

Daytime Phone #