

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Apr 18, 2002 8:00 am
Secretary of State

04-18-2002 90446 021 *****61.25

DOCUMENT # 701998

1. Entity Name

ALOMA UNITED METHODIST CHURCH, INC.

Principal Place of Business

**ALOMA UNITED METHODIST CHURCH
3045 ALOMA AVENUE
WINTER PARK FL 32792**

Mailing Address

**ALOMA UNITED METHODIST CHURCH
3045 ALOMA AVENUE
WINTER PARK FL 32792**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-6046991

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MATHENEY, C. DONALD
7506 WAUNATTA CT.
WINTER PARK FL 32792**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	RADER, JOHN L	3307 BALSAM DR	WINTER PARK FL 32792	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	STANDRIDGE, T. LYNN	336 MERRIE OAKS ROAD	WINTER PARK FL 32792	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
	ST TAYLOR, KARIN	7924 SNOWBERRY CIRCLE	ORLANDO FL 32819	<input checked="" type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	PT SCHLARF, KENNETH	1305 BRAZILIAN LANE	WINTER PARK FL 32792	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	SCOTT, RANDY W	4715 HALL RD.	ORLANDO FL 32817	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
	AMEY, GEOFFREY	2849 BUCCANEER DR.	WINTER PARK FL 32792	<input checked="" type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
	PT E. Allen Fuller	2762 Prince Road	Winter Park, FL 32792	<input type="checkbox"/>	<input checked="" type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
	T			<input checked="" type="checkbox"/>	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
	VT Theresa Y. Shaw	4419 Foreland Place	Orlando, FL 32812	<input type="checkbox"/>	<input checked="" type="checkbox"/>

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ALLOM FULLER REQUIRED

Date

Daytime Phone #

CR2E037 (9/01)

Attachment # 701998
941330

Aloma United Methodist Church
3045 Aloma Ave.
Winter Park, FL 32792

FEI Number: 59-6046991

10. Additional Directors

Title: ST
Name: Lynn Akers
Street Address: 4410 Inland Lane
City-St-Zip: Orlando, FL 32817

Title: T
Name: J. Perry Reams
Street Address: 339 Carolyn Dr.
City-St-Zip: Oviedo, FL 32765

Title: T
Name: Kevin W. Tilbury
Street Address: 311 N. Ranger Blvd.
City-St-Zip: Winter Park, FL 32792