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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

702589

(3)

FIRST UNITED METHODIST CHURCH OF TITUSVILLE. INC

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Principal Plac	e of Businoss	Mailing Address		1 100111 10011 10011 10011	aus .su. g.bu. g.bii gisti gibii gibii gisti gibii
206 S HOPKINS	S AVE	P O BOX 6486		3. Date Incorporated or Qualifi	ed
206 S HOPKINS		206 S HOPKINS AV		06/22/1961_	
TITUSVILLE FL US	32/50	TITUSVILLE FL 32782-486 US		4. FEI Number	Applied For
				59-1084415	Not Applicable
	lace of Business	2a. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional
21	0	26			Fee Required
Suite, Apt	#, etc	Suite, Apt. #, etc.		6. Election Campaign Financin	-
City & State	0	City & Stato		7. Is this nonprofit corporation	Added to Fees
23	~	28		r. Is this nonprofit corporation	Yes No
Zip	Country	Zip	Country	8. This corporation owes or ha	s paid the current year Intangible
24	26	29	30	Personal Property Tax due	
	9. Name and Address of Current	Registered Agent		10. Name and Address of Nev	Registered Agent
			81 Name	John Moor	0,
	ON, FRENCH		82 Street	Address (P.O. Box Number is Not Acce	ntoblo)
	BINHOOD CT		83 2	930 St. Mar	KS Dr.
TITUSVIL	LE FL 32796		63		
1			84 City.	طاند	FL 85 ごうごろう
11. Pursuant	to the provisions of Sections 617 0502	and 617 1508. Florida Statutes	s the above-named	corporation submits this statement for t	he purpose of changing its registered
office or r	egistered agent, or both, in the State of	of Florida. Such change was au	ithorized by the corp	poration's board of directors. I hereby a	ccept the appointment as registered
agentina		-3_	icia Statutes.		_ 1 /201
					7 <i>19 18</i> (/
SIGNATURE	Signature, proof or printed name of registered agent	and title II applicable (NOTE	Registered Agent signature	required when reinstating)	2/3/98
SIGNATURE)	Office field or protest name of registered agreed OFFICE FIS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 12
12.	OFFICERS AND		13. 1.1 TITLE	ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 12 Change X Addition
12.	D PEDDICORD, RICHARD	DIRECTORS	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO O	Change X Addition
12. TITLE	OFFICERS AND PEDDICORD, RICHARD 1640 TICONDEROGA CT	DIRECTORS	13. 1.1 TITLE	Dan Grmand 2001 Sun Valleys	☐ Change 🔀 Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND PEDDICORD, RICHARD 1640 TICONDEROGA CT TITUSVILLE FL	DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP	Dan Grimand 2001 Sun Valleys	☐ Change 🔯 Addition
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14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Plorida 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.

SIGNATURE: AND MOSTER AS CHAIR THUSTER

2/3/98

FILED

Feb 16 1998 8:00am

Secretary of State

CR2E037