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
Mar 09, 1999 8:00 am
Secretary of State
03-09-1999 90145 026 ****61.25

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DOCUMENT # 702589

1. Corporation Name
FIRST UNITED METHODIST CHURCH OF TITUSVILLE, INC

Principal Place of Business	Mailing Address
206 S HOPKINS AVE 206 S HOPKINS AV TITUSVILLE FL 32796 US	P O BOX 6486 206 S HOPKINS AV TITUSVILLE FL 32782-486 US

2. Principal Place of Business
21 First United Methodist
Suite, Apt. #, etc.
22 206 S. Hopkins Ave.
City & State
23 Titusville, FL.
Zip 24 32796 Country 25 U.S.A.

2a. Mailing Address
26 206 S. Hopkins Ave.
Suite, Apt. #, etc.
27
City & State
28 Titusville, FL.
Zip 29 32796 Country 30 U.S.A.

3. Date Incorporated or Qualifed
06/22/1961

4. FEI Number
59-1084415
☐ Applied For
☐ Not Applicable

5. Certifcate 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

MOORE, JOHN
2930 ST MARKS DR
TITUSVILLE FL 32780

10. Name and Address of New Registered Agent

81 Name: Robert Preston
82 Street Address (P.O. Box Number is Not Acceptable): 2650 Hillcrest Ave.
83
84 City: Titusville, FL 85 Zip Code: 32796

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: Robert A Preston DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PEDDICORD, RICHARD 1640 TICONDEROGA CT TITUSVILLE FL	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D Bill Queen 3085 Saunders PL. Titusville, FL 32780	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRIMAND, JAN 2001 SUN VALLEY ST TITUSVILLE FL 32780	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	C Robert Preston 2650 Hillcrest Ave. Titusville, Fl 32796	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C MOORE, JOHN 2930 SE MARKS DR MIMS FL 32780	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D John Moore P.O. Box 1445 Titusville, FL 32780	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HOLMES, ROBERT 3972 HUNTERS RIDGE WAY TITUSVILLE FL	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D Roy Whitson 2875 Armadillo Tr. Titusville, FL 32780	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STYLES, DIANE 4211 LONGBOW DR TITUSVILLE FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	V Diane Styles 4211 Longbow Dr. Titusville, FL 32796	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WATKINS, JOHN 3596 ALAN DR TITUSVILLE FL 32780	☒ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	D Alan Arnold 1420 Dozier Ave. Titusville, FL 32780	☐ Change ☒ Addition

CR2E037 (11/98)

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: Robert A Preston TITLE PRESIDENT 3-1-99 407-269-2631
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #