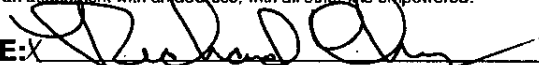


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2004 8:00 am
Secretary of State

02-23-2004 90047 043 ****61.25

DOCUMENT # 702589 1. Entity Name FIRST UNITED METHODIST CHURCH OF TITUSVILLE, INC.					
Principal Place of Business FIRST UNITED METHODIST 206 S HOPKINS AV TITUSVILLE, FL 32796 US			Mailing Address FIRST UNITED METHODIST 206 S HOPKINS AV TITUSVILLE, FL 32796 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
JOHN STEPHENS 459 GAUVA AVE. TITUSVILLE, FL 32780				Name Richard Cherry Street Address (P.O. Box Number is Not Acceptable) 3064 Knox McRae Dr. City Titusville FL Zip Code 32780	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE:  DATE: 2/16/04 (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHERRY, RICHARD ☒ Delete 3064 KNOX MCREA DR. TITUSVILLE, FL 32780		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Robert Preston ☐ Change ☒ Addition 2650 Hillcrest Ave. Titusville, FL 32796	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEPHENS, JOHN ☒ Delete 459 GAUVA AVE TITUSVILLE, FL 32780		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Lois Queen ☐ Change ☒ Addition 3085 Saunders Pl. Titusville, FL 32780	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILSON, RICHARD ☒ Delete 2925 JASMINE ST. TITUSVILLE, FL 32796		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Barbara Borman ☐ Change ☒ Addition 2822 Dutton DR, Titusville, FL 32796	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCLESTER, KELLEY ☐ Delete 1430 CREST AVE TITUSVILLE, FL 32780		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WINN, JAMES ☐ Delete 1120 SAND PINE CR. TITUSVILLE, FL 32796		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILLIAM, KENNEDY ☐ Delete 4240 TIWA LN TITUSVILLE, FL 32796		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: 2/16/04 Daytime Phone #: 269-7631		