

2001 UNIFORM BUSINESS REPORT (UBR)

2/1

FILED
Mar 02, 2001 8:00 am
Secretary of State

02-13-2001 90584 026 ****61.25

DOCUMENT # 703285

1. Entity Name

CASON UNITED METHODIST CHURCH, INC.

Principal Place of Business

Mailing Address

342 NORTH SWINTON AVE.
 DELRAY BEACH FL 33444

342 NORTH SWINTON AVE.
 DELRAY BEACH FL 33444

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6031865

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WRIGHT, MORGAN J
9371 LONGMEADOW CIRCLE
BOYNTON BEACH FL 33436

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

Morgan J Wright - Financial Sec'y -

2-8-2001

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VD	☒ Delete
NAME	COKER, ROBERT	
STREET ADDRESS	113 SOUTH K STREET	
CITY-ST-ZIP	LAKE WORTH FL 33461	
TITLE	TD	☒ Delete
NAME	STEWART, RICH	
STREET ADDRESS	4 ASPEN COURT	
CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE	PT	☐ Delete
NAME	ROSS, MIKE	
STREET ADDRESS	5293 GARFIELD ROAD	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE	SD	☐ Delete
NAME	SMITH, JEFF	
STREET ADDRESS	2525 SW 14 STREET	
CITY-ST-ZIP	BOYNTON BEACH FL 33426	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	VICE-PRESIDENT - VD	☒ Change ☐ Addition
NAME	JEFF SMITH	
STREET ADDRESS	2525 SW 14 ST -	
CITY-ST-ZIP	BOYNTON BEACH - FL 33426	
TITLE	TREASURER TD	☒ Change ☐ Addition
NAME	WILLIAM MCDONOUGH	
STREET ADDRESS	345 SE 7TH AVENUE	
CITY-ST-ZIP	DELRAY BEACH - FL 33483 - 5240	
TITLE	(SAME)	☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SECRETARY SD	☒ Change ☐ Addition
NAME	KATHI STANLEY	
STREET ADDRESS	1710 NW 18 AVENUE - #103	
CITY-ST-ZIP	DELRAY BEACH - FL 33445	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Morgan J Wright
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-8-2001 1-561-276-5302

Date

Daytime Phone #

CR2E037 (10/00)