FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 703802

(9)

CONWAY UNITED METHODIST CHURCH, INC.

Principal Place of Business

Mailing Address

APPROVED AND FILED

95 FEB -2 MIII: 47

SECRETARY OF STATE TALLARASSEL, FLORIDA

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3401 SOUTH CONWAY ROAD ORLANDO FL 32812-4699				3401 SOUTH CONWAY ROAD ORLANDO FL 32812-4699										
	Disease I F	V				<u>.</u>				3. Date Incorporated or Qualified 03/28/1962	3a. [03/24/		
2. 21	Principal Place of Business			— —	2a. Mailing Address			4. FEI Number			Applied For			
	Suite, Apt. #, etc.			26	26			59-1146126 Not Applicable						
22	City & Stal				Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required				
23	Zip				City & State			6. Election Campaign Financing Trust Fund Contribution □ \$5.00 May Be Added to Fees						
24	ΖΙΡ		Country 25			Counti 1				ation has liability for intangible tax under s. 199.032,				
-71	4 25 29 3 9. Name and Address of Current Registered Agent				30									
	5. Ivanie and Address of Contant negistered Agent						В	1 Name		10. Name and Address of New F	legistered	Agent		
	DAMDS	ON, JOHN					Ľ	1401116	F	rank A Young				
		ORENA LAN	JE				8:	2 Street	Addres	s (P.O. Box Number is Not Acceptab				_
		DO FL 328(•				8:	2	3	332 Kaw Gardens	Lane	<u> </u>		
	OnLAN	DO FL 3200	JO				0.	'						
							8-	! 1	Or	lando	FL	~	ip Code 2812	
₹1.	or registe	to the provisi red agent, or	ons of Sections 617,050 both, in the State of Flor	2 and 6 ida. Sud	317.1508, Florida St chichange was auth	atutes, the	e above the cor	named co	prporati	on submits this statement for the pur of directors. I hereby accept the app	pose of ch	anging its	registered office	СӨ
	familiar w	ith, and accer	of the obligations of, Sec	tion 61	7.0503, Florida Stat	utes.	210 001	porations	DOBIG 1	or directors. Thereby accept the app	ointment at	registere	Jagent. I am	
	SNATURE	Cuan	M (M) XXXX	{'}})						1-16	96		
12.		Signature, typed	or printed name/offregisterers aben		if applicable	(NOTE: Reg		anl signature r	equired wi	hen reinstating)	DATE			
TITL		VPT	OF IOLIS AL	D DINE	DELETE		13.		r—	ADDITIONS/CHANGES TO OFF				(12/95)
NAM		1	, FRANK A.						PD			Change	Addition	= = =
	EET ADDRESS	1	EW GARDENS LANE				1.2 NAME			ank A Young				34
	-ST-ZIP	-	00. FL 00000			Į.		T ADDRESS	33	32 Kew Gardens 1	LAne			
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NAM			ON, JOHN		רַ_]טנננונ		21 TITLE		Λ̈́Ъ	- .		Change	☐ Addition	O
	ET ADDRESS		DRENA LANE				2.2 NAME			vid Snith				
	-\$1-ZIF	ORLAND						T ADDRESS		11 Heithgate Coi				ŀ
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	ET ADDRESS	14217 N					3.2 NAME							1
	-\$1 · ZIP	ORLAND						T ADDRESS						
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STRE	F1 ADDRESS		RYSTAL LK.DRIVE					T ADORESS		-702/06.	/960	11095-	-002	
	· ST - ZIP	ORLAND					4.4 CITY -			*****	51.25	***	* 61,25	
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		v codify that i	the information currelied	au. Au.i.	- fr - 1 - 1 - 1 - 1		64 CITY S	21- ZIP]

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 addressy

SIGNATURE: Frank A Young Chauk (

407 246 1058