

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 704268

FILED
May 01, 2003
Secretary of State

Entity Name: THE FLORIDA UNITED METHODIST CHILDREN'S HOME, INC.

Current Principal Place of Business:

51 MAIN STREET
ENTERPRISE, FL 32725

New Principal Place of Business:

Current Mailing Address:

51 MAIN STREET
ENTERPRISE, FL 32725

New Mailing Address:

FEI Number: 59-0638479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARMICHEL, ALEXANDER C
51 MAIN STREET
ENTERPRISE, FL 32725 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TRST () Delete
Name: ROSGAY, RAY
Address: 640 SW 6TH STREET
City-St-Zip: FT. LAUDERDALE, FL

Title: TRTA () Delete
Name: BOONE, ALFREDA
Address: 1001 AVIENDO DEL CIRCO
City-St-Zip: VENICE, FL 34285

Title: TRC () Delete
Name: SHELTON-CULVER, SALLIE
Address: 319 GARDEN ST
City-St-Zip: DAYTONA BEACH, FL 32114

Title: P () Delete
Name: CARMICHEL, ALEXANDER C.
Address: 51 MAIN STREET
City-St-Zip: ENTERPRISE, FL

Title: TRVC () Delete
Name: DUNCAN, MONT
Address: PO BOX 3767
City-St-Zip: LAKELAND, FL 33802

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TRTA (X) Change () Addition
Name: JONES, DONALD W DR.
Address: 2146 SE 25TH LOOP
City-St-Zip: OCALA, FL 34471

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: CARMICHEL, ALEXANDER C
Address: 51 MAIN STREET
City-St-Zip: ENTERPRISE, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALEXANDER C. CARMICHEL

P

05/01/2003

Electronic Signature of Signing Officer or Director

Date