FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

CITY-ST-ZIP

SIGNATURE:

(1)

ST. PAUL UNITED METHODIST CHURCH OF LARGO, INC.

FILED May 13 1998 8:00am Secretary of State

. J. Tarakin tradic artikli salak silika tirik araki birah alah araki araki araki araki araki araki araki 1801

Principal Place of Business Mailing Address									4 184(11 14811 ATIM			,	41511 \$1611 1481
1190 HIGHLAND AVENUE LARGO FL 44440 33770				1199 HIGHLAND AVENUE LARGO FL 84948 83770				3. Date Incorporated 06/20/1963					
									4. FEI Number			1	Applied For
									59-103167 <u>9</u>	5			Not Applicable
2. Principal Place of Business				2a. Mailing Address					6. Certificate of Statu	s Desired		4	Additional
21				26								Fee I	Required
Suite, Apt. #, etc.				Suite, Apt. #, etc.					Election Campaign	-	_	7	May Be
22				27					Trust Fund Contribution Added to Fees				
City & State	•		-	City & State					7. Is this nonprofit corporation a homeowners association?				
23		0	28	28 Country					☐ Yes 🔀 No				
Zip Country			<u> </u>	Zip Country 29 33770 30					8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No				
24 33770 25 9. Name and Address of Current			29				!	10. Name and Address of New Registered Agent					
	9. (141114	THE RUGIESS OF COME	SIN VIEW	nerou Myorii		81	Name		10.				
MADO C		Ni.				L							
WARD, R. CARLTON 1253 PARK						82	Street	Street Address (P.O. Box Number is Not Acceptable)					
CLEARWATER FL							1		· · · · · · · ·				
CLEARWAIER FL													
						84	City				FL	85 Zij	Code Code
SIGNATURE		ons of Sections 617.05 ent, or both, in the Stat th, and accept the obli or printed name of registered a							ration submits this state n's board of directors. I when reinstating)	ment for the hereby acc	purpose of ept the app	f changing pointment a	its registered is registered
12.	Signature, typed	OFFICERS A	 		13.		POLY BISH INTO	re redoken	ADDITIONS/CHANC	SES TO OFF		DIRECTO	DRS IN 12
TITLE	Ċ	OI FIDEIIO A	IND DINE	DELETE		TITLE		Т	7,0011010,010,410	20 10 011		Change	
NAME	HALL, D	AVE				NAME							
	STREET ADDRESS 826 FOUTAINHEAD DRIVE			1.3 STREET ADDRESS			.						
CITY-ST-ZIP LARGO						1.4 CITY-ST-ZIP							
TITLE	D			DELETE		TITLE		D	- , 1	,		-Change	Addition
NAME	HARDIN, MARIANINE			2.21		22 NAME		M	imi Steele	و م			
		PER NW #121			2.3	STREE	ET ADDRESS 64		limi Steele 101 Augusta Blu		•		
CITY-ST-ZIP	LARGO				2.4	CITY-	ST-ZIP	Sec	minole. FL	3377			
TITLE	D			☐ DELETE 3		3.1 TITLE						Change	Addition
NAME	RINKER, MARSHALL E			3.2		NAME							
STREET ADDRESS	ET ADDRESS 140 WILLOWDALE DR			3.3 \$			T ADDRESS	:					
CITY-ST-ZIP	BELLEAIR FL						ST-ZIP						
TITLE	D	-		☐ DELETE	4.11	TITLE						☐ Change	Addition
NAME	EMERY,	***************************************		4. 2	4. 2 NAME								
STREET ADDRESS				4.3 STREET ADDRESS		:							
CITY-ST-2NP	LARGO	LARGO FL		4.41	4.4 CITY-ST-ZIP							· - · · · ·	
TITLE	VC				5.1	5.1 TITLE						☐ Change	Addition
NAME		uster, richard			5.2	NAME							
STREET ADDRESS		AKDALE DALE 8.			5.3	STREE	T ADDRESS						
CITY-ST-ZIP	CLEARY	VATER FL			5.41	CITY-	ST-ZIP						
TITLE	8	-		DELETE	6.1	TITLE						L Change	Addition
NAME		ÆLL, MAJORIE			6.2	NAME		1					
STREET ADDRESS	14559 E	BAY HILLS DR.			6.3	STREE	T ADDRESS	;					

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 48.4 changed, or on an attachment with an address