

**FILED**  
**May 24, 1999 8:00 am**  
**Secretary of State**

05-24-1999 90029 048 \*\*\*\*61.25

NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 707166**  
 1. Corporation Name  
**DRUID HILLS METHODIST CHURCH INC**

Principal Place of Business 1712 SOUTHEAST LAKE WEIR ROAD OCALA FL 32671	Mailing Address 1712 SOUTHEAST LAKE WEIR ROAD OCALA FL 34471 US
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 04/16/1964
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1104459
City & State 23	City & State 28	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
Country 29	Zip 30	

9. Name and Address of Current Registered Agent  MCKINLEY, JOANN 720 SE 9TH AVE OCALA FL 34471	81 Name <b>BILL RICHARDS</b>
	82 Street Address (P.O. Box Number is Not Acceptable) <b>3845 S.W. 6TH AVE</b>
	83
	84 City <b>OCALA</b> FL 85 Zip Code <b>34474</b>

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.  
 SIGNATURE: *[Signature]* DATE: **8/6/99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>HINKEL, DORIS</b>	1.2 NAME	<b>JANELLE BRUCHU</b>
STREET ADDRESS	<b>5385 SW 81ST ST</b>	1.3 STREET ADDRESS	<b>3220 S.E. 21ST AVE</b>
CITY-ST-ZIP	<b>OCALA FL 34476-3751</b>	1.4 CITY-ST-ZIP	<b>OCALA, FL 34471</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BATLIN, JOHN</b>	2.2 NAME	
STREET ADDRESS	<b>1108 SE 14TH STREET</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>OCALA FL</b>	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MCIVER, MAC</b>	3.2 NAME	
STREET ADDRESS	<b>2901 SW 41ST ST</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>OCALA FL 34474</b>	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>RICHARDS, BILL</b>	4.2 NAME	
STREET ADDRESS	<b>3845 SW 6TH AVE</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>OCALA FL 34474</b>	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LEIGHTON, RANDY</b>	5.2 NAME	
STREET ADDRESS	<b>6698 SW 155TH ST</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>DUNNELLON FL 34432</b>	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SPARKMAN, ELIZABETH</b>	6.2 NAME	
STREET ADDRESS	<b>3561 SE 38TH ST</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>OCALA FL 34480</b>	6.4 CITY-ST-ZIP	

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 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* DATE: **5-23-99** DAYTIME PHONE #: **352-629-5688**

CR2E037 (11/98)