



**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 22, 2004 8:00 am**  
**Secretary of State**

04-22-2004 90010 027 \*\*\*\*61.25

<b>DOCUMENT # 707476</b>					
1. Entity Name THE FIRST UNITED METHODIST CHURCH OF DUNEDIN, INC.					
Principal Place of Business 421 MAIN ST. DUNEDIN, FL 34698		Mailing Address 421 MAIN ST. DUNEDIN, FL 34698		<b>54038474</b> 	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	04142004 Chg-NP CR2E037 (10/03)	
4. FEI Number 59-0725536				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
TORNGA, JOHN 1901 SADDLE HILL RD N. DUNEDIN, FL 34698			Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>John Tornga</i>			DATE <i>4-14-2004</i>		
Filing Fee is \$61.25 Due by May 1, 2004			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TC HAYES, MICHAEL 2999 LANDING WAY PALM HARBOR, FL 34684 <i>TC</i>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Glenn King 41a Beltrees St. Dunedin, FL 34698 <i>T</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TC MATTHEWS, RICHARD W 2455 INDIAN TRAILS E PALM HARBOR, FL 34683 <i>X Delete</i>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DORIS CROSSMAN 1701 Pinehurst Rd. #14H Dunedin, FL 34698 <i>TS</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TC JORDAN, RALPH 1996 ORANGE CT DUNEDIN, FL 34698 <i>T</i>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Wally Dutton 239 Florida Ave. Dunedin, FL 34698 <i>T</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	William Hart 2340 St. Charles Drive Clearwater, FL 33764 <i>T</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAVID WRASSMAN 2001 Summit Drive Dunedin, FL 34698 <i>T</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Hinda BacZanski 1345 Overcash Drive Dunedin, FL 34698 <i>T</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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: <i>Doris Crossman</i>			DATE: <i>4/14/2004</i>		