

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2005 8:00 am
Secretary of State

03-02-2005 90080 048 ****61.25

DOCUMENT # 709597
 1. Entity Name
THE FIRST METHODIST CHURCH OF FORT MEADE, INC.



Principal Place of Business
 135 E BROADWAY
 FORT MEADE, FL 33841 US

Mailing Address
 135 E BROADWAY
 FORT MEADE, FL 33841 US

20017851



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01272005 Chg-NP CR2E037 (10/03)

City & State
 Zip Country

4. FEI Number
59-1090882

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MANLEY, ROBERT L
 201 FIRST STREET NORTH EAST
 FORT MEADE, FL 33841

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	TC	<input type="checkbox"/> Delete
NAME	GUNTER, WAYNE	
STREET ADDRESS	400 N. OAK	
CITY-ST-ZIP	FORT MEADE, FL 33841	
TITLE	D	<input type="checkbox"/> Delete
NAME	NUNNALLEE, JAMES	
STREET ADDRESS	300 NE 3RD ST	
CITY-ST-ZIP	FORT MEADE, FL 33841	
TITLE	D	<input type="checkbox"/> Delete
NAME	GUENTHER, DENNIS	
STREET ADDRESS	610 NASHUA	
CITY-ST-ZIP	FORT MEADE, FL 33841	
TITLE	S	<input type="checkbox"/> Delete
NAME	VANCIL, PAT	
STREET ADDRESS	18 N. PERRY	
CITY-ST-ZIP	FORT MEADE, FL 33841	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BARNETT, TINA	
STREET ADDRESS	2711 US HWY 98 EAST	
CITY-ST-ZIP	FT. MEADE, FL 33841	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	COLLINS, JUNIOR	
STREET ADDRESS	525 E. BROADWAY	
CITY-ST-ZIP	FORT MEADE, FL 33841	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	C/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Vancil, Carl	
STREET ADDRESS	18 N. Perry	
CITY-ST-ZIP	Fort Meade, FL 33841	

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: Tina S. Barnett Tina S. Barnett February 28, 2005 (863) 285-7578

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #