

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 30 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **709897** (3)
1. Corporation Name

EAST NAPLES UNITED METHODIST CHURCH, INC.



Principal Place of Business 2701 AIRPORT ROAD SOUTH NAPLES FL 33962 US	Mailing Address 2701 AIRPORT ROAD SOUTH NAPLES FL 34112-4817 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 34112 25 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 34112 30 Country	3. Date Incorporated or Qualified 11/09/1965	3a. Date of Last Report 02/07/1996	4. FEI Number 59-2171804	Applied For Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent KROUT, HAROLD 19 CREEK CIRCLE NAPLES, FL 33962	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 _____ (NOTE: Registered Agent signature required when reissuing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PC ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	LUTHER, JAMES	1.2 NAME	
STREET ADDRESS	212 PALMETTO DUNES CIR	1.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	1.4 CITY-ST-ZIP	
TITLE	V ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	LITTLE, BILL	2.2 NAME	
STREET ADDRESS	587 SAINT ANDREWS BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	2.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	RATLIFF, CLIFF	3.2 NAME	
STREET ADDRESS	5280 MYRTLE LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	3.4 CITY-ST-ZIP	
TITLE	D ☒ DELETE	4.1 TITLE	☐ Change ☒ Addition
NAME	FERRELL, ROBERT	4.2 NAME	JORDAN, JOHN
STREET ADDRESS	5924 CRANBROOK WAY, #101	4.3 STREET ADDRESS	269 BALTUSROL DR.
CITY-ST-ZIP	NAPLES FL	4.4 CITY-ST-ZIP	NAPLES, FL 34113
TITLE	T ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	SLABAUGH, DENNIS	5.2 NAME	
STREET ADDRESS	630 HENLEY DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	5.4 CITY-ST-ZIP	
TITLE	S ☒ DELETE	6.1 TITLE	☒ Change ☐ Addition
NAME	BAUR, DEDE	6.2 NAME	MCCURE, HELEN
STREET ADDRESS	2200 CLIPPER WAY	6.3 STREET ADDRESS	3067 ROUND TABLE CT.
CITY-ST-ZIP	NAPLES FL	6.4 CITY-ST-ZIP	NAPLES, FL 34112

14. I do 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.

SIGNATURE: _____ 1/30/97 941 774 1333

CR2E037 (9/96)