FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -5 PM 4:06

DOCUMENT # **711227** **(9)**

1. Corporation Name
THE FLORIDA UNITED METHODIST FOUNDATION, INC.

Principal Place of Business	Mailing Address
1140 E. MCDONALD STREET LAKELAND FL 33801	PO BOX 70 LAKELAND FL 33802 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/19/1966
3a. Date of Last Report: 03/29/1994
4. FEI Number: 59-1148710 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

LAMB, PAULA N.
1140 E. MCDONALD STREET
LAKELAND FL 33801

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE		☐ Change ☐ Addition
NAME	BAKER, BRUCE A	1.2 NAME		
STREET ADDRESS	4611 SW 164 TERR	1.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL	1.4 CITY-ST-ZIP		
TITLE	VD	2.1 TITLE		☐ Change ☐ Addition
NAME	GLISSON, LOUISE	2.2 NAME		
STREET ADDRESS	711 SPRINGER DRIVE, #11	2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WALES FL	2.4 CITY-ST-ZIP		
TITLE	T	3.1 TITLE		☐ Change ☐ Addition
NAME	LAMB, PAULA N.	3.2 NAME		
STREET ADDRESS	5653 SOUTHBROOK DR.	3.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND, FL 00000	3.4 CITY-ST-ZIP		
TITLE	D	4.1 TITLE	D	☒ Change ☐ Addition
NAME	BERES, STEVEN D	4.2 NAME	Beres, Steven D.	
STREET ADDRESS	PO BOX DRAWER 24 NA	4.3 STREET ADDRESS	555 Colorado Ave.	
CITY-ST-ZIP	STUART FL	4.4 CITY-ST-ZIP	Stuart, FL 34994	
TITLE	D	5.1 TITLE	D	☒ Change ☐ Addition
NAME	BISHOP, DONALD E JR	5.2 NAME	BISHOP, Donald E., Jr.	
STREET ADDRESS	PO BOX 2942 NA	5.3 STREET ADDRESS	410 Central Ave.	
CITY-ST-ZIP	ST PETERSBURG FL	5.4 CITY-ST-ZIP	St. Petersburg, FL 33701	
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	CROSS, J W	6.2 NAME		
STREET ADDRESS	3200 MANATEE AVE W	6.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Paula N. Lamb Paula N. Lamb, Treasurer 3/28/95 (813) 688-5563
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Names of additional officers or directors:

D	GOSS, Theresa C.	1201 Macrae Ave. Clearwater, FL 34615
D	HINTZMAN, Morris E.	2001 N. Florida Ave. Tampa, FL 33602
V/D	KINDER, Charles E.	1431 13th Street Clermont, FL 34711
D	MANN, Robert E.	P. O. Box 907 Tarpon Springs, FL 34688
D	REAMS, Hugh E.	P. O. Box 3542 St. Petersburg, FL 33731
S/D	RIDGWAY, Louise	1716 NW 22nd Drive Gainesville, FL 32605
D	RUSH, Randolph J.	250 Park Ave., S. 5th Floor Winter Park, FL 32789
D	SPRINGER, J. Steven	1245 W. Fairbanks Ave., Suite 450 Winter Park, FL 32789
V/D	WHITLOW, John D., Sr.	3412 Kori Road, Suite 2 Jacksonville, FL 32257
D	WITTEN, W. Dean	2125 E. South St. Orlando, FL 32803
E	MARSTON, Thomas W.	1140 E. McDonald St. Lakeland, FL 33801
AT	BERRY, Beverley C.	1140 E. McDonald St. Lakeland, FL 33801
AS	DONNELL, Ruth E.	1140 E. McDonald St. Lakeland, FL 33801

NOTE: E = Executive Director
AT = Assistant Treasurer
AS = Assistant Secretary