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 FEB 22 AM 11:15

DOCUMENT # 711686 (6)

1. Corporation Name

RIVIERA UNITED METHODIST CHURCH, INC.

Principal Place of Business	Mailing Address
175 - 62ND AVENUE N. ST PETERSBURG FL 33702	175 - 62ND AVENUE N. ST PETERSBURG FL 33702

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/25/1966
3a. Date of Last Report: 02/18/1994
4. FEI Number: 59-1362370 ☐ 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
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

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

9. Name and Address of Current Registered Agent

EVANS JOHN
1900 67TH AVE. NORTH
ST. PETERSBURG FL 33702

10. Name and Address of New Registered Agent

81 Name: Schnell Margaret
82 Street Address (P.O. Box Number is Not Acceptable): 6301 13th St N
83
84 City: St. Petersburg FL 85 Zip Code: 33702

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	
TITLE	C
NAME	EVANS JOHN
STREET ADDRESS	1900 67TH AVE. N
CITY-ST-ZIP	ST. PETERSBURG FL
TITLE	VC
NAME	LEWIS J.C.
STREET ADDRESS	1915 ILLINOIS AVE.
CITY-ST-ZIP	ST. PETERSBURG FL 33703
TITLE	D
NAME	SCHNELL MARGARET
STREET ADDRESS	6301 13TH ST. NORTH
CITY-ST-ZIP	ST. PETERSBURG FL 33702
TITLE	SD
NAME	HULL DICK
STREET ADDRESS	2045 ILLINOIS AVE.
CITY-ST-ZIP	ST. PETERSBURG FL 33703
TITLE	D
NAME	HEIM PAIGE
STREET ADDRESS	6397 25TH ST. N
CITY-ST-ZIP	ST PETERSBURG FL 33703
TITLE	D
NAME	TAYLOR JOHN
STREET ADDRESS	16143 BAYOU GRANDE BLVD. NE
CITY-ST-ZIP	ST. PETERSBURG FL 33703

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	C	☒ Change ☐ Addition
1.2 NAME	Schnell Margaret	
1.3 STREET ADDRESS	6301 13th St N	
1.4 CITY-ST-ZIP	St. Petersburg, Fl 33702	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	TR	☐ Change ☒ Addition
3.2 NAME	Crow Chuck	
3.3 STREET ADDRESS	2032 Iowa Ave NE	
3.4 CITY-ST-ZIP	St. Petersburg, FL 33703	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
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: Margaret Schnell 2/15/95 (813) 526-2999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

000541B