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May 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 711777 (3)

1. Corporation Name
FIRST METHODIST CHURCH OF CHIPLEY, INC.



Principal Place of Business Mailing Address
1285 JACKSON AVE
CHIPLEY FL 32428
US

3. Date Incorporated or Qualified 11/08/1966
3a. Date of Last Report 05/01/1996

2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-1163780 Applied For Not Applicable
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
ESTES, RAY
837 FOURTH STREET
CHIPLEY FL 32428

10. Name and Address of New Registered Agent
81 Name David Ridley
82 Street Address (P.O. Box Number is Not Acceptable) 631 Corbin Rd.
83
84 City Chipley FL 85 Zip Code 32428

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: *[Signature]* David Ridley, Ch. Board of Trustees 4/16/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAY, RALPH	1.2 NAME	
STREET ADDRESS	611 SOUTH THIRD ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	CHIPLEY, FL 0	1.4 CITY-ST-ZIP	
TITLE	P <input checked="" type="checkbox"/> DELETE	2.1 TITLE	P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ESTES, RAY	2.2 NAME	Ridley, David
STREET ADDRESS	837 FOURTH ST	2.3 STREET ADDRESS	631 Corbin Rd.
CITY-ST-ZIP	CHIPLEY FL	2.4 CITY-ST-ZIP	Chipley fl 32428
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HARRELL, DON	3.2 NAME	Gordy, Paul
STREET ADDRESS	ROUTE 4 BOX 619	3.3 STREET ADDRESS	783 Fifth St.
CITY-ST-ZIP	CHIPLEY, FL 0	3.4 CITY-ST-ZIP	Chipley, FL 32428
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEPHENS, GLADYS	4.2 NAME	
STREET ADDRESS	306 SOUTH SIXTH ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	CHIPLEY FL	4.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	AUKEMA, BONNIE	5.2 NAME	Brown, Gene
STREET ADDRESS	3061 WOODREST RD	5.3 STREET ADDRESS	946 Main St.
CITY-ST-ZIP	CHIPLEY, FL 0	5.4 CITY-ST-ZIP	Chipley fl 32428
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HENDERS, WALT	6.2 NAME	Jackson, Gordon
STREET ADDRESS	403 COURT AVE	6.3 STREET ADDRESS	1721 Old Bonifay Rd.
CITY-ST-ZIP	CHIPLEY FL	6.4 CITY-ST-ZIP	Chipley, FL 32428

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *[Signature]* David Ridley 4/16/97 (904) 638-0010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Mo/Yr 0077821

CR2E037 (9/96)