

FILED
Apr 09, 1999 8:00 am
Secretary of State

04-09-1999 90021 015 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # 713593

1. Corporation Name
**LIMONA "VILLAGE CHAPEL" UNITED METHODIST CHURCH,
 INCORPORATED, OF BRANDON, FLORIDA**

Principal Place of Business 408 LIMONA RD BRANDON FL 33510	Mailing Address 408 LIMONA RD BRANDON FL 33510
--	--

373862 - 90064 - 37



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/08/1967	
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-1665359		Applied For <input type="checkbox"/> Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country	29. Country	30. Country			

9. Name and Address of Current Registered Agent O'NEAL, JOANNE 205 E. JERSEY AVE. BRANDON FL 33511				10. Name and Address of New Registered Agent			
81. Name Carol Sahlin		82. Street Address (P.O. Box Number is Not Acceptable) 306 W. Jersey Ave.		83.		84. City Brandon	
				85. Zip Code FL 33510			

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: *Carol Sahlin* DATE: **4/21/99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE TR	<input type="checkbox"/> DELETE	1.1 TITLE TR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME GOLDSTON, S		1.2 NAME Ron Belcher	
STREET ADDRESS 1303 IVYWOOD DR		1.3 STREET ADDRESS 1203 Sail Way	
CITY-ST-ZIP BRANDON FL 33510		1.4 CITY-ST-ZIP Valrico, FL 33594	
TITLE TR	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WILBANKS, BILL		2.2 NAME	
STREET ADDRESS 1704 ORANGE HILL DR.		2.3 STREET ADDRESS	
CITY-ST-ZIP BRANDON FL		2.4 CITY-ST-ZIP	
TITLE TR	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PRICE, V		3.2 NAME	
STREET ADDRESS 4710 HUNTS CT		3.3 STREET ADDRESS	
CITY-ST-ZIP PLANT CITY FL 33567		3.4 CITY-ST-ZIP	
TITLE TR	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME STUTZMAN, PHIL		4.2 NAME	
STREET ADDRESS 18917 BOYETTE RD.		4.3 STREET ADDRESS	
CITY-ST-ZIP LITHIA FL		4.4 CITY-ST-ZIP	
TITLE T	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME VINCENT, ERIC		5.2 NAME	
STREET ADDRESS 115 RUBY CIR.		5.3 STREET ADDRESS	
CITY-ST-ZIP BRANDON FL		5.4 CITY-ST-ZIP	
TITLE TRC	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME STUTZMAN, K		6.2 NAME	
STREET ADDRESS 617 LITHIA PINECREST RD		6.3 STREET ADDRESS	
CITY-ST-ZIP BRANDON FL 33511		6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE: *Katherine Harris* DATE: **1-14-99** DAYTIME PHONE #: **813-689-7855**

CR2E037 (11/98)