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FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION
ANNUAL REPORT
1988



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

713758
FIRST UNITED METHODIST CHURCH OF LAKE ALFRED, IN
110 S. PENN AVE
P.O. BOX 1227
LAKE ALFRED, FL 33850

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

3. Date Incorporated or Qualified To Do Business in Florida

12/07/1967

4. Federal Employer Identification Number (FEIN)

71-3758631

5. Date of Last Report

02/18/1987

6. Names and Street Addresses of Each Officer and Director as of December 31, 1987

1. Names of Officers and Directors	2. Title	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State
BUCCI, ALFRED	V/P	110 BOUGANVILLE AVE.	POLK CITY, FL.
COBB, LOUIE	P	220 W. PARK LN.	LAKE ALFRED, FL.
Wolf, Frank	P	2184 Ariana Blvd.	Auburndale, Fla. 33823
LEWIS, CAROLYN	S	913 CHAR-MIL LN.	LAKE ALFRED, FL
COX, CAROLE	T	215 S. ILAKEE	LAKE ALFRED, FL

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent

COBB, LOUIE
220 W. PARK LN.
LAKE ALFRED, FL. 33850

8. Name and Address of New Registered Agent

Name 81

Carole Cox

Street Address 1 (Do NOT Use P.O. Box Number) 82

215 S. Ilakee St.

Street Address 2 (Do NOT Use P.O. Box Number) 83

Lake Alfred, Fla. 33850

City and State 84

Lake Alfred,

FL.

Zip Code 85

33850

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on 3-1-88

I hereby accept the appointment of registered agent I am familiar with and accept the obligations of Section 607.035 F.S.

SIGNATURE

Carole Cox
(Registered Agent Accepting Appointment)

DATE

4-1-88

10. If a foreign corporation, date first transacted business in Florida

11. See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. (Officer or Director signing must be listed in Block 6)

Signature

Carole Cox

Date

4-1-88

Typed Name of Signing Officer or Director

Carole Cox

Title

Treasurer

Telephone Number

(813) 956-1411

12. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED ☐

\$5 Additional Fee required for a Certificate of Status