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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

336 SOUTH HALIFAX DRIVE

ORMOND BEACH FL 32176

714797

(8)

FIRST UNITED METHODIST CHURCH OF ORMOND BEACH, I NC.

Principal Place of Business

ORMOND BEACH INC

Mailing Address

ORMOND BEACH INC 336 SOUTH HALIFAX DRIVE ORMOND BEACH FL 32176



3a. Date of Last Report

3. Date Incorporated or Qualified

					06/20/1968	04/20/1995
Principal Place of Business 2a. Mailing Address 26					4. FEI Number 59-0782455	Applied For
Suite, Apt. #, etc. Suite, Apt. #, etc.					33 0102433	Not Applicable
22 27					5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Count	ry	8. This corporation has liability for intar	
24	25 29 30		30			Yes XNo
	Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered Agent		
			8	1 Name		
UPSON, MAGNOLIA				2 Street A	dda a Do Bartharia	
857 QUAIL RUN				Z Street A	Address (P.O. Box Number is Not Acceptable)	
ORMOND BEACH, FL EF 32174				3		
				1		
			8-	4 City		85 Zip Code
11 Pursuant	to the provisions of Sections 617 0500	247 1502 Ft 11 0		<u> </u>		
familiar w	red agent, or both, in the State of Florid ith, and accept the obligations of, Secti	da. Such change was authorize ion 617.0503, Florida Statutes.	ed by the cor	named cor poration's b	poration submits this statement for the purpose soard of directors. I hereby accept the appointn	nent as registered agent. I am
SIGNATURE	Signature, types or printed name of registered agon	o title if applicable. (NO	E: Registered Ag	ent signature red	pured when reinstating)	3/29/96 DATE
12.	OFFICERS ANI	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	3S AND DIRECTORS IN 12
TITLE	CTR	DELETE	1.1 TITLE		CITA	Change Addition
NAME	NORRIS, CLIFFORD S		1.2 NAME	.	JAMES Ruslee	Z Change T Madelian
STREET ADDRESS	4 KATRINAS DR			T ADDRESS	43 N Tymbox Creek Rd	
CITY-ST-ZIP	ORMOND BEACH FL			1	ORMOND BEACH, FL 3217	i
TITLE	VTR	DELETE	1.4 CITY- 2.1 TITLE	51-ZIP	ORMIDNO BEACH, PL SAIT	
NAME	RUSLER, JAMES				V/TR	Change Addition
STREET ADDRESS	43 N TYMBER CREEK RD		2.2 NAME		CURTIS R. BURKETT	
	ORMOND BEACH FL			1 ADDRESS	396 Muddy Creck LN	
CITY-ST-ZIP TITLE	A==		2 4 CITY	-ST-ZIP	ORMOND Bevel, FL 32174	
NAME	STR DELETE BURKETT, CAROL		31 TITLE		SITR	Change Addition
	I		3.2 NAME	i	Chearl Youngman	
STREET ADDRESS	355 EMORY DR		3.3 STREE	f ADDRESS	if booksend way	
CITY-ST-ZIP	ORMOND BCH FL		3.4 CITY	ST-ZIP	ORMOND Beach FL 32174	
TITLE	VOLUMONANA ARRIVATA	DELETE	4.1 TITLE		_ T	Change Addition
NAME	YOUNGMAN, MAURICE D.		4. 2 NAME		Robert L JOHNSON	•
STREET ADDRESS	4 CREEKVIEW WAY		43 STREE	T ADDRESS	9 Rocky Creek Trail	i
CITY-ST-ZIP	ORMOND BCH FL		4.4 CITY-	ST-ZIP	ORMOND Break, FL 32174	
TITLE	TR	□DELETE 5			TR	Change Addition
NAME	TURNER, KATHY		5.2 NAME		DATE T. VRANIK	Mail arrando. Til sagraggi
STREET ADDRESS	109 OAK LANE			T ADDRESS	24 BAY Pointe Delue	
CITY-ST-ZIP	ORMOND BCH FL		5.4 CITY - 1		6	
TITLE	TR	3.4 (1		31-ZIP	ORMOND Beach, FL 32174	- FI :-
NAME	TEMPLETON, JACK	Deceil	6.1 TITLE		TR	Change Addition
STREET ADDRESS	29 CHEROKEE TRAIL		62 NAME		Judy Monaco	ĺ
ľ	ORMOND BCH FL		63 STREE	ADDRESS	136 River Bluff DR	
CITY-ST-ZIP	Certify that the information availand a	AND ALC OF THE RESIDENCE OF THE PARTY OF THE	6.4 CITY-5	ST-ZIP	DRMOND Beach, FL 32174	

Ido 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)(k), 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 appears in Block 12 or Block 13 if changed, or on an attachment with an affices.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/96 Date

(904) 255-2345