

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2003 8:00 am
Secretary of State

02-05-2003 90120 007 ****61.25

DOCUMENT # 715203

1. Entity Name

FIRST UNITED METHODIST CHURCH OF HOLLYWOOD, INC.



Principal Place of Business

**1804 VAN BUREN STREET
HOLLYWOOD FL 33020**

Mailing Address

**1804 VAN BUREN STREET
HOLLYWOOD FL 33020**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1094820**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HUNTER, E.T., ESQ.
1930 TYLER ST.
HOLLYWOOD FL 33020**

Name

Theresa Mather

Street Address (P.O. Box Number is Not Acceptable)

2701 Casablanca Dr

City

Miramar

FL

Zip Code

33023

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	KEBRODLE, PAMELA	
STREET ADDRESS	4325 JACKSON ST	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	CONNER, JOHN S	
STREET ADDRESS	1414 ADAMS ST.	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	CADDY, SEAN	
STREET ADDRESS	2620 DEWEY ST	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	ST	<input type="checkbox"/> Delete
NAME	PUTNICK, ANN	
STREET ADDRESS	916 N. 18TH AVE	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	TR	<input type="checkbox"/> Delete
NAME	HONETGHON, MAX	
STREET ADDRESS	2624 RODMAN ST.	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	HARDENBURG, LOUISE	
STREET ADDRESS	414 SE 4TH TERRACE	
CITY-ST-ZIP	DANIA BEACH FL 33004	

TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Alan Turin	
STREET ADDRESS	2116 Monroe Ter	
CITY-ST-ZIP	Hollywood, FL 33020	
TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bart Carlisle	
STREET ADDRESS	1804 Van Buren St	
CITY-ST-ZIP	Hollywood, FL 33020	
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Phyllis Carlisle	
STREET ADDRESS	1804 Van Buren St	
CITY-ST-ZIP	Hollywood, FL 33023	
TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bruce Mather	
STREET ADDRESS	2701 Casablanca Dr	
CITY-ST-ZIP	Miramar, FL 33023	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E037 (10/02)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

1/27/03

954-924-0043