

FILE NOW: FILING FEE IS \$61.25

FILED
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90017 032 ****61.25

0061097

NONPROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 716298

1. Corporation Name

UNITED METHODIST CHURCH OF PINE ISLAND, INC.

Principal Place of Business

5701 PINE ISLAND RD.
 BOKEELIA FL 33922

Mailing Address

5701 PINE ISLAND RD.
 BOKEELIA FL 33922



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

04/02/1969

4. FEI Number

59-1773457

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Election Campaign Financing
 Trust Fund Contribution

\$5.00 May Be
 Added to Fees

9. Name and Address of Current Registered Agent

RUGH, DONALD
5026 SANDPIPER DR
ST. JAMES CITY FL 33956

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME **P**
RUGH, DONALD
 STREET ADDRESS **5026 SANDPIPER DR**
 CITY-ST-ZIP **ST. JAMES CITY FL 33956**

TITLE DELETE

NAME **V**
BEECHY, WAYNE
 STREET ADDRESS **7631 CARPENTER RD.**
 CITY-ST-ZIP **BOKEELIA FL**

TITLE DELETE

NAME **T**
RINGLE, MARIE
 STREET ADDRESS **16041 AURA LN**
 CITY-ST-ZIP **BOKEELIA FL**

TITLE DELETE

NAME **D**
HONC, KEN
 STREET ADDRESS **7015 HOWARD RD**
 CITY-ST-ZIP **BOKEELIA FL**

TITLE DELETE

NAME **D**
MOONEY, ED
 STREET ADDRESS **2433 CARAMBOLA**
 CITY-ST-ZIP **ST. JAMES CITY FL**

TITLE DELETE

NAME **D**
KITE, MARIAN
 STREET ADDRESS **3692 TROPICAL LANE**
 CITY-ST-ZIP **ST. JAMES CITY FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME **D**
Waddell, Robert
 1.3 STREET ADDRESS **2620 Date St.**
 1.4 CITY-ST-ZIP **St. James City, FL 33956**

2.1 TITLE Change Addition

2.2 NAME **D**
Frahm, Chad
 2.3 STREET ADDRESS **12563 Trend Blvd.**
 2.4 CITY-ST-ZIP **Bokeelia, FL 33922**

3.1 TITLE Change Addition

3.2 NAME **D**
Dooley, Mike
 3.3 STREET ADDRESS **5370 Marina Dr.**
 3.4 CITY-ST-ZIP **Bokeelia, FL 33922**

4.1 TITLE Change Addition

4.2 NAME **D**
Longley, Ed
 4.3 STREET ADDRESS **2823 Eighth Ave.**
 4.4 CITY-ST-ZIP **St. James City, FL 33956**

5.1 TITLE Change Addition

5.2 NAME **D**
Werline, Tom
 5.3 STREET ADDRESS **12255 Star Shell Dr.**
 5.4 CITY-ST-ZIP **Cape Coral, FL 33991**

6.1 TITLE Change Addition

6.2 NAME **D**
Nielson, Shirley
 6.3 STREET ADDRESS **5892 Samoa Dr.**
 6.4 CITY-ST-ZIP **Bokeelia, FL 33922**

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: *Donald M. Rugh* **Donald M. Rugh**

5/3/99

(941) 283-2386

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)