

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 718105

1. Entity Name

OLGA-FORT MYERS SHORES UNITED METHODIST CHURCH

Principal Place of Business

14036 MATANZAS DR
FT. MYERS FL 33905-2236

Mailing Address

14036 MATANZAS DR
FT. MYERS FL 33905-2236

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

59-2422755

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

WISE, STANLEY
14949 RANDOLPH DRIVE SE
FT MYERS FL 33905

Name

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

City

FL

Zip Code

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.

SIGNATURE

Stanley Wise

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

(NOTE: Registered Agent signature required when reinstating)

4/28/2001

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
Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VCD
BURT, DOT
12301 RIVER RD SE
FT MYERS FL 33905

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
MCCOLLUM ED
13820 RIVER FOREST DRIVE SE
FT MYERS FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
~~VCD~~
CLARK, LOEHR
2113 WENOLA CT
FT MYERS FL 33905

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
FELTY, BETTY S
2220 SANTIAGO AVE SE
FT MYERS FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CT
VAN PATTON, ALTON
2560 COLUMBUS ST
FT MYERS FL 33901

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HEMRY, DUANE
14903 Wise Way
Ft. Myers, FL 33905

☐ Change

☒ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change

☐ Addition

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:

Duane Hemry

Duane Hemry

03/28/01

694-2797

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90204 029 ****61.25



DO NOT WRITE IN THIS SPACE

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CR2E037 (10/00)