

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 2:25

DOCUMENT # 719941 (7)

1. Corporation Name
THE FIRST UNITED METHODIST CHURCH OF SPRING HILL, INC.

Principal Place of Business

Mailing Address

9344 SPRING HILL DRIVE
SPRING HILL FL 34608

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SPRING HILL FL 34608

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/29/1970	3a. Date of Last Report 02/17/1994
4. FEI Number 59-1565592	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEIS OSCAR L
6235 HARCROSS CT
SPRING HILL FL 34606

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	
85. Zip Code	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Oscar L. Weis

Oscar L. Weis

1/31/95

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	1.1 TITLE	DS
NAME	WEIS, OSCAR L	1.2 NAME	McGinley, Stephen
STREET ADDRESS	6235 HARCROSS CT	1.3 STREET ADDRESS	5068 Cumberland Lane
CITY - ST - ZIP	SPRING HILL FL 34606	1.4 CITY - ST - ZIP	Spring Hill, FL 34607
TITLE	DS	2.1 TITLE	D
NAME	GOLDEN, JON	2.2 NAME	Kasper, Glenn
STREET ADDRESS	9575 CHRISTINE ST	2.3 STREET ADDRESS	239 Lemon Ave N.
CITY - ST - ZIP	SPRING HILL FL 34608	2.4 CITY - ST - ZIP	Brookville, FL 34601
TITLE	D	3.1 TITLE	D
NAME	BONDS, HORACE	3.2 NAME	Golden, Jon
STREET ADDRESS	9297 PICKENS ST.	3.3 STREET ADDRESS	9575 Christine St
CITY - ST - ZIP	SPRING HILL FL 34608	3.4 CITY - ST - ZIP	Spring Hill, FL 34608
TITLE	D	4.1 TITLE	D
NAME	ENSIGN, EVELYN	4.2 NAME	Sublett, Edwin
STREET ADDRESS	1228 ALADDIN RD.	4.3 STREET ADDRESS	6760 Pearleaf Court
CITY - ST - ZIP	SPRING HILL FL 34609	4.4 CITY - ST - ZIP	Spring Hill, FL 34606
TITLE	D	5.1 TITLE	D
NAME	SELLARS, EDWARD	5.2 NAME	Sellers, Edward
STREET ADDRESS	1026 Godfrey Ave	5.3 STREET ADDRESS	1026 Godfrey Ave
CITY - ST - ZIP	SPRING HILL FL 34609	5.4 CITY - ST - ZIP	Spring Hill, FL 34609
TITLE	D	6.1 TITLE	D
NAME	ALVAREZ, VIRGIL	6.2 NAME	Alvarez, Virgil
STREET ADDRESS	5170 Alliance Ave	6.3 STREET ADDRESS	5170 Alliance Ave
CITY - ST - ZIP	SPRING HILL FL 34609	6.4 CITY - ST - ZIP	Spring Hill, FL 34609

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Oscar L. Weis

Oscar L. Weis

1/31/95

(904) 683-2600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Typed Name)