## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

720992

(7)

THE FIRST UNITED METHODIST CHURCH OF HUDSON, FLO RIDA, INC.

RIDA, INC.						
Principal Place of Business Mailing Address				I (Billie 10016 1901) ditte inter	E tiåt åthit ålkis åthit åthit æthit midis imms	
		13123 US 19 HUDSON FL 34667				
				3. Date Incorporated or Qualified 05/21/1971	3a. Date of Last Report 02/16/1995	
2. Principa! Pla 21	ice of Business	2a. Mailing Address 26		4. FEI Number <b>59-1590960</b>	Applied For Not Applicable	
Suite, Apt. #	t, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zıp	Country 25	Zip	Country	This corporation has liability for Florida Statutes	intangible tax under s. 199.032,  ☐ Yes 🔀 No	
	9. Name and Address of Currer			10. Name and Address of New F	Registered Agent	
			81 Name	9		
YOUNGS	S, ADDISON		<b>62</b> Stree	et Address (P.O. Box Number is Not Acceptal	ole)	
7425 BUCHANAN DR				PO Box 953 N/A		
PORT RICHEY FL 34668			83			
			84 City		85 Zip Code	
			<b>~</b>   ~ Pc	ort Richey	FL   B4673	
or registere	o the provisions of Sections 617.050; ed agent, or both, in the State of Flor th, and accept the obligations of, Sec	ida. Such change was authorized	the above-named by the corporation	corporation submits this statement for the pu 's board of directors. I hereby accept the app	rpose of changing its registered office pointment as registered agent. I am	
SIGNATURE _						
	Signature, typed or printed name of registered agen			e required when reinstating)	DATE	
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO DE	FICERS AND DIRECTORS IN 12  [V] Change	
TITLE		[] Derete	1.1 TITLE		(X) Change	
NAME	YOUNGS, ADDISON		1.2 NAMÉ			
STREET ADDRESS	7425 BUCHANAN DR.		1.3 STREET ADDRES	FO DOX 333 M/W		
City-St-ZiP	PORT RICHEY FL	FIDELETE	1.4 CITY - ST - ZIP	Port Richey FL 34	1673 Change Addition	
TITLE	V	DELÉTE	2 1 TITLE		K) Change [] Addition	
NAME	TURNER, JAMES		2 2 NAME	_		
STREET ADDRESS	15722 DONZI DRIVE		2 3 STREET ADDRES	34667		
CITY - ST - ZIP	HUDSON FL	CONTEST	2 4 CHTY-ST-ZIP	34007	Change Addition	
TITLE	TR	DETELE	3 1 TITLE		V cuanda 🗀 vorution	
NAME	HOWELL, HENRY		3 2 NAME			
STREET ADDRESS	12011 PENZANCE LANE		3 3 STREET ADORES	34654		
CITY - ST - ZIP	NEW PORT RICHEY FL	DELETE	3 4. CITY - ST - ZIP		Change	
TITLE	TR		4 1 THILE		Al ananga   I nosition	
NAME	LYMAN, RICHARD		4 2 NAME			
STREET ADDRESS	13600 WOODSIDE DR.		4 3 STREET ADDRES	34667		
CITY - ST - ZIP	HUDSON FL	DELETE	5 1 TITLE	<del></del>	<b>K</b> Change ☐ Addition	
TITLE	S WARDONIOTON WANDA			S	47) or wide 17 yearings	
NAME	HARRINGTON, WANDA		5 2 NAME	PAPIN, WANDA		
STREET ADDRESS	5332 JONES COURT		5 3 STREET ADORES	3021 Marwick Par	ne	
City-ST-ZIP	NEW PORT RICHEY FL	<b>∑</b> DELETE	5 4 CITY-ST-ZIP 6 1 TITLE	New Port Richey	FL 34655 Change 😡 Addition	
TITLE	TR THOMAS OCCAR	<b>K</b> larren		TR	Country Resemble	
NAME	THOMAS, OSCAR		6.2 NAME	CLEER, RAY		
STREET ADDRESS	7406 AMERICA WAY		6 3 STREET ADDRES	S   12409 Quail Run	Row	
CITY-ST-ZIP	NEW PORT RICHEY FL	d with this files is valuntarily fursic	6.4 CHY-S1-ZIP	Bayonet Point FI	34667	

I do 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 oath; that I am an office 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 of Epock 13 if changed, or on an attachment with an address.

SIGNATURE:

GIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OF DIRECTOR

ADDISON E. YOUNGS PRESCHATRMAN

1/24/96

813/868-6178 Daytine Phone #