2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 11, 2004 8:00 am
Secretary of State
08-11-2004 90001 037 ****61.25

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08022004 Chg-NP CR2E037 (10/03)

DOCUMENT # 721850

1. Entity Name
THE FIRST UNITED METHODIST CHURCH OF SEBRING, FLORIDA

Principal Place of Business	Mailing Address
125 S PINE ST SEBRING, FL 33870 US	125 S PINE ST SEBRING, FL 33870 US

2. Principal Place of Business	3. Mailing Address
105 S. Pine Ave	105 S Pine Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sebring FL	City & State: Sebring FL
Zip: 33870 Country: Highlands	Zip: 33870 Country: Highlands

4. FEI Number: 59-0760205 ☐ 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
IRVINE, DELORES 125 S PINE ST SEBRING, FL 33870	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Dolores P. Irvine 8-03-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 8, 2004

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	CD GILBERT, STEPHEN 6015 GOLDEN RD SEBRING, FL 33872	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Chairman Williams, Edward 437 Whip Poor Will Dr Sebring FL 33875	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SPRINGER, JOANN L 6312 MATANZAS DRIVE SEBRING, FL 33872	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S IRVINE, DOLORES 2682 S FLAMINGO RD AVON PARK, FL 33825	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V POLLARD, ROBERT 237 MICCO AVE SEBRING, FL 33870	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JERNIGAN, WILLIAM H 1257 EDGEWATER POINT DR SEBRING, FL 338702202	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOLBERG, MERLIN 3352 DELAWARE AVE SEBRING, FL 338722501	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Rapp, Robert 2521 Pinewood Blvd Sebring FL 33870	☒ 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: Joann L. Springer Joann L Springer 8/3/04 863-385-5184
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #