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FILED
May 13 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **726099** (5)
1. Corporation Name
FIRST UNITED METHODIST CHURCH OF STUART, INC.



Principal Place of Business 1500 KANNER HIGHWAY P.O. BOX 539 STUART FL 34994 US	Mailing Address P. O. BOX 539 P.O. BOX 539 STUART FL 34995-0539 US
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3. Date Incorporated or Qualified 04/11/1973	3a. Date of Last Report 05/01/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country	4. FEI Number 59-0816465 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	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No
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9. Name and Address of Current Registered Agent CRARY, EVANS, JR 555 COLORADO AVE. SUITE 1 STUART FL 34994	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
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WARREN, MICHAEL 752 S.W. PINE TREE LANE PALM CITY FL ☒ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	PD Hoffa, Dale 2010 SW Olympic Club Terrace Palm City, FL 34990 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HOON, EDWARD L 951 N.W. SUNSET TERR. STUART FL ☒ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	VD Montgomery, Scott 2274 SE Cree Road Port St. Lucie, FL 34953 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T WRIGHT, RICHARD 8776 S.E. BAHAMA CIRCLE HOBE SOUND FL ☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD GARLINGTON, KATHERINE 1083 S.E. ST. LUCIE BLVD. STUART FL ☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	SD Salisbury, Ruth 1210 SE Parkview Place E-10 Stuart, FL 34994 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PARADISE, JO MARIE 5 GUMBO LIMBO WAY STUART FL ☒ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	D Strout, Terry 868 SW Hidden River Ave. Palm City, FL 34990 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LAFON, TOM J 120 HILLCREST DRIVE STUART FL ☒ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	D Fuller, Christi 471 Riverside Drive Stuart, FL 34994 ☐ Change ☐ Addition

14. I do 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.

SIGNATURE:  **4-30-97** 561-282-6262
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0071977

CR2E037 (9/96)