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FILED

Feb 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **729621** (3)

1. Corporation Name

THE UNITED METHODIST CHURCH DISTRICT BOARD OF MISSIONS AND CHURCH EXTENSION OF ST. PETERSBURG DI

Principal Place of Business

Mailing Address

**1567 HIGHLAND AVE
NO. 297
CLEARWATER FL 34616**

**1567 HIGHLAND AVE
NO. 297
CLEARWATER FL 34616**

3. Date Incorporated or Qualified

05/07/1974

4. FEI Number

59-1037212

Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 **1543 S. Highland Ave.**

22 City & State

Suite, Apt. #, etc.

27 **No. 297**

23 Zip

Country

28 **Clearwater FL 33756**

24 Zip

Country

29 **33756**

30 **Pinellas**

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**COLE, STEPHEN
400 CLEVELAND STREET
9TH FLOOR
CLEARWATER FL 34615**

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

DC
COUNTS, NORRIS
9400 NINTH ST., N.
ST. PETERSBURG FL

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

DS
STEPHENSON, JOHN M.
2801 EAST LAKE ROAD
PALM HARBOR FL

1.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

DC
COLE, STEPHEN
400 CLEVELAND STREET, 9TH FLOOR
CLEARWATER FL 34615

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

DT
MAXFIELD, JAMES R
945 40TH AVE. NO.
ST PETERSBURG FL

1.4 CITY - ST - ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

DT
MAXFIELD, JAMES R
1567 HIGHLAND AVE., NO. 297
CLEARWATER FL 34616

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

DT
MAXFIELD, JAMES R
1567 HIGHLAND AVE., NO. 297
CLEARWATER FL 34616

2.2 NAME ☐ Change ☐ Addition

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. 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 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: *James R. Maxfield*

2-9-98 (813) SP5-1207

CR2E037 (10/97)