


FILE NOW: FILING FEE IS \$61.25

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 1567 HIGHLAND AVE NO. 297 CLEARWATER FL 34616	Mailing Address 1567 HIGHLAND AVE NO. 297 CLEARWATER FL 34616
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3. Date Incorporated or Qualified 05/07/1974
4. FEI Number 59-1037212
Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 1543 S. Highland Ave. 27 Suite, Apt. #, etc. 27 No. 297 28 City & State 28 Clearwater FL 33756 29 Zip 29 33756 30 Country 30 Pinellas
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC COUNTS, NORRIS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	9400 NINTH ST., N. ST. PETERSBURG FL	1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	DS STEPHENSON, JOHN M.	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2801 EAST LAKE ROAD PALM HARBOR FL	2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	DC COLE, STEPHEN	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	400 CLEVELAND STREET, 9TH FLOOR CLEARWATER FL 34615	3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	DT MAXFIELD, JAMES R	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	945 40TH AVE. NO. ST PETERSBURG FL	4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DT MAXFIELD, JAMES R	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1567 HIGHLAND AVE., NO. 297 CLEARWATER FL 34616	5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
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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)