

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90459 012 ****61.25

DOCUMENT # 729621

1. Entity Name

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



Principal Place of Business

1567 HIGHLAND AVE
NO. 297
CLEARWATER FL 34616

Mailing Address

1543 S HIGHLAND AVE
NO 297
CLEARWATER FL 33756
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

MOORE

CR2E037 (11/03)

4. FEI Number

59-1037212

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

**COLE, STEPHEN
625 COURT ST. SUITE 200
CLEARWATER FL 33756**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 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

TITLE DC
NAME COUNTS, NORRIS ☐ Delete
STREET ADDRESS 9400 NINTH ST., N.
CITY-ST-ZIP ST. PETERSBURG FL

TITLE DS
NAME STEPHENSON, JOHN M. ☒ Delete
STREET ADDRESS 2801 EAST LAKE ROAD
CITY-ST-ZIP PALM HARBOR FL

TITLE DC
NAME COLE, STEPHEN ☐ Delete
STREET ADDRESS 625 COURT ST. SUITE 200
CITY-ST-ZIP CLEARWATER FL 33756

TITLE DT
NAME JAMES, KEVIN M SR ☐ Delete
STREET ADDRESS 1543 HIGHLAND AVE. S. NO 297
CITY-ST-ZIP CLEARWATER FL 33756

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DS
NAME Engelhardt, Charles ☐ Change ☒ Addition
STREET ADDRESS 9530 Startkey Rd
CITY-ST-ZIP Seminole FL 33777

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Stephen O Cole / Stephen O. Cole
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/04
Date

727/441-8966
Daytime Phone #