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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 730249

1. Corporation Name

NAPLES UNITED CHURCH OF CHRIST, INC.

Principal Place of Business

5200 CRAYTON ROAD
NAPLES FL 34103
US

Mailing Address

5200 CRAYTON ROAD
NAPLES FL 34103
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

07/22/1974

4. FEI Number

59-1555020

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THOMAS, ASHMAN
801 SLASHPIKE CT
#1401
NAPLES FL 34108

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 P ☒ DELETE
NAME BLATTNER, RALPH
STREET ADDRESS 863 REEF POINT CIRCLE
CITY-ST-ZIP NAPLES FL

1.1 TITLE P ☐ Change ☒ Addition
1.2 NAME Robert Thornton
1.3 STREET ADDRESS 731 Willowhead Drive
1.4 CITY-ST-ZIP Naples FL 34103 ☐ Change ☒ Addition

TITLE T ☒ DELETE
NAME PATRIDGE, ROBERT G
STREET ADDRESS 231 MONTEREY DRIVE
CITY-ST-ZIP NAPLES FL 34119

2.1 TITLE T ☐ Change ☒ Addition
2.2 NAME Thomas Ashman
2.3 STREET ADDRESS 801 Slashpine Court #1401
2.4 CITY-ST-ZIP Naples FL 34108

TITLE T ☐ DELETE
NAME SCOTT, DOUGLAS
STREET ADDRESS 6677 MILL RUN CIRCLE
CITY-ST-ZIP NAPLES FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE S ☐ DELETE
NAME VINING, BETTY
STREET ADDRESS 67360 PELICAN BAY BLVD #201-C
CITY-ST-ZIP NAPLES FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE T ☐ DELETE
NAME BUCKLEY, ROBERTA
STREET ADDRESS 3100 GULF SHORE BLVD, N., SUITE 602
CITY-ST-ZIP NAPLES FL 34103

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
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, with all other like empowered.

SIGNATURE:

Thomas Ashman
SIGNATURE REQUIRED

2/1/99

941/261-1453

CR2E037 (11/98)