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Feb 06 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 731440 (4)

1. Corporation Name  
THE EVANGELICAL METHODIST CHURCH OF OSCEOLA COUNTY, INC.



Principal Place of Business: 1215 HICKORY TREE RD. ST. CLOUD FL 34771-8572 US  
Mailing Address: 1215 HICKORY TREE RD. ST. CLOUD FL 34771-8572 US

3. Date Incorporated or Qualified: 12/23/1974  
4. FEI Number: 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  
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

2. Principal Place of Business: 21 Suite, Apt. #, etc.; 22 City & State; 23 Zip; 24 Country  
2a. Mailing Address: 26 Suite, Apt. #, etc.; 27 City & State; 28 Zip; 29 Country; 30

9. Name and Address of Current Registered Agent  
OSCAR, P. LONG  
1240 HICKORY TREE RD.  
ST. CLOUD FL 34771

10. Name and Address of New Registered Agent  
81 Name: REV ROBERT PERKINS  
82 Street Address (P.O. Box Number is Not Acceptable): 3220 ANTHONY DRIVE  
83  
84 City: ST. CLOUD FL 85 Zip Code: 34771

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: Robert W. Perkins Robert W. Perkins DATE: 1/26/98

12. OFFICERS AND DIRECTORS

TITLE	TR	<input type="checkbox"/> DELETE
NAME	BRIDGES, THOMAS F	
STREET ADDRESS	N.A.	
CITY-ST-ZIP	KISSIMMEE FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	MARION FRED TOMS	
STREET ADDRESS	5270 STARLINE DR	
CITY-ST-ZIP	ST. CLOUD FL	
TITLE	TR	<input type="checkbox"/> DELETE
NAME	SIKES, CHARLES	
STREET ADDRESS	12 LIND AVE	
CITY-ST-ZIP	KISSIMMEE FL	
TITLE	TR	<input type="checkbox"/> DELETE
NAME	LONG, OSCAR P	
STREET ADDRESS	1240 HICKORY TREE ROAD	
CITY-ST-ZIP	ST CLOUD FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	EVA HARRELL	
STREET ADDRESS	808 MISSOURI AVE	
CITY-ST-ZIP	ST. CLOUD FL	
TITLE	T TR	<input type="checkbox"/> DELETE
NAME	SHAFFER, DEBY	
STREET ADDRESS	4754 MEADOW DRIVE	
CITY-ST-ZIP	ST. CLOUD FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	EVA CORBETT
5.3 STREET ADDRESS	P.O. BOX 701945 - 922 WYOMING AVE.
5.4 CITY-ST-ZIP	ST. CLOUD, FL 34770
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: [Handwritten Signature]

CR2E037 (1097)