

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # 734021 (9)

1. Corporation Name

CHRIST UNITED METHODIST CHURCH, INC.

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 10/08/1975	3a. Date of Last Report 03/31/1994
4. FEI Number 59-0637833	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

Principal Place of Business		Mailing Address	
467 - 1ST AVE. NORTH ST. PETERSBURG FL 33701		467 - 1ST AVE. NORTH ST. PETERSBURG FL 33701	
2. Principal Place of Business	2a. Mailing Address	21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State	23. Zip	28. Zip
24. Country	25. Country	29. Country	30. Country

9. Name and Address of Current Registered Agent

SCHUH, DANIEL B.
248 MIRROR LAKE DR. N.
ST. PETERSBURG FL 33701

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	VICE CHAIRMAN ☐ Change ☒ Addition
NAME	BUDDIN, JANIE	1.2 NAME	HEARN, JEFFREY K.
STREET ADDRESS	3970 14 LANE N E	1.3 STREET ADDRESS	1211 4320 AVE N.
CITY-ST-ZIP	ST PETERSBURG, FL 0	1.4 CITY-ST-ZIP	ST PETE, FL 33703
TITLE	D	2.1 TITLE	D ☐ Change ☒ Addition
NAME	GREGORY, THOMAS H.	2.2 NAME	FRANK R. BORTNER
STREET ADDRESS	6274 18TH ST., N.E.	2.3 STREET ADDRESS	2865 54th ST. NORTH
CITY-ST-ZIP	ST. PETERSBURG FL	2.4 CITY-ST-ZIP	ST PETERSBURG, FL 33710
TITLE	D	3.1 TITLE	D ☐ Change ☒ Addition
NAME	HILL, PHILLIP	3.2 NAME	FAAZE, RICHARD O.
STREET ADDRESS	8161 22 AVE N	3.3 STREET ADDRESS	8065-52 Lane
CITY-ST-ZIP	ST PETE, FL 00000	3.4 CITY-ST-ZIP	Pine Hls Park, FL 34665
TITLE	SD	4.1 TITLE	☐ Change ☐ Addition
NAME	MORRILL, JANE	4.2 NAME	
STREET ADDRESS	2028 ILLINOIS AVE., N.E.	4.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	4.4 CITY-ST-ZIP	
TITLE	DC	5.1 TITLE	☐ Change ☐ Addition
NAME	LEONARD, LUANNA	5.2 NAME	
STREET ADDRESS	5929 29TH AVE., N.	5.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	EVANS, PATRICIA	6.2 NAME	
STREET ADDRESS	4379 43rd ST. So.	6.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG, FL 33711	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Luanna Leonard
Chairperson Board of Trustees

3/10/95

Date

Signature of Agent