## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

734920 DOCUMENT # 1. Corporation Name

(2)

CUDICT		LIMITED	METHODIST	ILIC
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CHRIS1	CHURCH UNITED METHO	DDIST, INC.				
Principal Place of Business		Mailing Address	Mailing Address		T AND SALENDER EATER DEPOSIT ROUND EINER D	MET MENTE MENTE MENTE MENTE MENTE MENTE 1891
4845 N.E. 25TH AVE. 4845 N.E. 25TH		4845 N.E. 25TH AVE. FT. LAUDERDALE FL 33	· · · -			
					3. Date Incorporated or Qualified 02/09/1976	3a. Date of Last Report 03/17/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number <b>59-0931259</b>	Applied For	
21		26		29-093 1239	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing		
23		28		Trust Fund Contribution	S5.00 May Be Added to Fees	
Ζιρ	Country	Zıp	Countr	y	8. This corporation has liability for in	
24	25	29	30		Florida Statutes	Yes No
	9. Name and Address of Curren	t Registered Agent		1	10. Name and Address of New Registered Agent	
DIOLER			81	Name		
	WILLIAM		82	Street A	ddress (P.O. Box Number is Not Acceptable	2)
	ROWARD BLVD					
17TH FLR			83	<b>'</b>		
PI LAUL	DERDALE FL 33394		84	City		FL 85 Zip Code
or register	o the provisions of Sections 617,0502 ed agent, or both, in the State of Floric th, and accept the obligations of, Secti	da. Such change was authorize	s, the above ed by the con	named con poration's b	poration submits this statement for the purp loard of directors. I hereby accept the appoi	ose of changing its registered office
SIGNATURE	in, and accept the congains is of, each	on on the order				
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable (NO)	TE: Registered Age	ent signature rec	uired when reinstating)	DATE
12.	OFFICERS AND		13.		ADDITIONS/OHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TIFLE	PD CHITH DONALD	DELETE	11 TITLE			Change  Addition
NAME SMITH, DONALD			1.2 NAME			
STREEL ADDRESS 5540 NW 51 AVE COCONUT CREEK FL			1.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	VD VD	DELETE	1 4 CITY -	ST-ZIP		[] Change [] 444 an
	IUEN, ALICE		2 1 TITLE			Change Addition
NAME STORET INDOCES	2142 NE 15 TERR		2 2 NAME			
STREET ADDRESS	WILTON MANORS FL		ľ	T ADORESS		
CHY-ST-ZIP TIFLE	SD	DELETE	2 4 CITY	51 · ZIF'		Change Addition
NAMÉ	Frazier, Robert J Jr		2 NAME	, I	EDATIFO PARENT	
STREET ADDRESS	44 CAYUGA ROAD			T ADDRESS	FRAZIER, ROBERT	$\overline{M}$ , $28$ .
CITY-ST-ZIP	SEA RANCH LAKES FL		3 4. C(1)			
TeTLE	D	DELETE	4 1 Title			☐ Change ☐ Addition
NAME	WERTZ, DONALD		4 2 NAM	:		
STREET ADDRESS	4710 NE 17 TERR		4 3 STREE	T ADDRESS		
CITY-ST-ZIP	OAKLAND PARK FL		4.4 CHY-	ST - ZIP		
TITLE	D	☐ DELETE	5 1 TITLE	T		☐ Change ☐ Addition
NAME	CASSELBERRY, HIBBARD J		5.2 NAME			
STREET ADDRESS	4848 NE 23 AVE		5 3 STREE	T ADDRESS		
C-TY-ST-Z-P	FORT LAUDERDALE FL		5.4 CiTY-	ST-ZIP		
TITLE		DELETE	61 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS	_		63 STREE	T ADDRESS		
CITY - SF - ZIP	w and he that the information as a second	with this filed is not start 4	64 Cilly-		6. for the eventure stated in Danta.	7/0/03 Clasida Chat has 15 die.

or 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 on this annual report or Jupple field annual report is true and accurate and that my signature shall have the same legal effect as if made under of the corporation of the receiver or distee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name hangeful or an address. I do hereby certify that the information indicates that I am an officer or direct appears in Block 12 or Block

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Donald Smith

1/17/96 407-338-7346