

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **736113** (2)

1. Corporation Name

**THE FLORIDA UNITED METHODIST DEVELOPMENT FUND, I
NC.**



Principal Place of Business

Mailing Address

**1140 EST McDONALD ST.
P.O. BOX 70
LAKELAND FL 33801
US**

**POST OFFICE BOX 70
LAKELAND FL 33802**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
06/16/1976

3a. Date of Last Report
04/05/1995

4. FEI Number
59-1707398

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

**LAMB, PAULA N.
1140 EAST McDONALD STREET.
LAKELAND FL 33801**

81 Name

Nance, Paula M.

82 Street Address (P.O. Box Number is Not Acceptable)

1140 East McDonald Street

83

84 City

Lakeland

FL

85

Zip Code
33801

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

Paula M. Nance

Paula M. Nance, Treasurer

(NOTE: Registered Agent signature required when reappointing)

DATE **3/5/96**

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **BERES, STEVEN D.**
CITY-ST-ZIP **555 COLORADO AVE**
STUART FL

TITLE ☐ DELETE
NAME **VD**
STREET ADDRESS **CROSS, J WALTER**
CITY-ST-ZIP **3200 MANATEE AVENUE, WEST**
BRADENTON FL

TITLE ☐ DELETE
NAME **PD**
STREET ADDRESS **GLISSON, LOUISE**
CITY-ST-ZIP **711 SPRINGER DRIVE, #11**
LAKE WALES FL

TITLE ☐ DELETE
NAME **SD**
STREET ADDRESS **KINDER, CHARLES E.**
CITY-ST-ZIP **1431 13TH STREET**
CLERMONT FL

TITLE ☐ DELETE
NAME **T**
STREET ADDRESS **LAMB, PAULA N.**
CITY-ST-ZIP **5653 SOUTHBROOK DR.**
LAKELAND FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE **VD** ☒ Change ☐ Addition
2.2 NAME **Cross, J. Walter**
2.3 STREET ADDRESS **P. O. Box 7428** N/A
2.4 CITY-ST-ZIP **Naples, FL 33941**

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

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

5.1 TITLE **T** ☒ Change ☐ Addition
5.2 NAME **Nance, Paula M.**
5.3 STREET ADDRESS **5653 Southbrook Dr.**
5.4 CITY-ST-ZIP **Lakeland, FL 33811**

6.1 TITLE **D** ☐ Change ☒ Addition
6.2 NAME **Mann, Robert E.**
6.3 STREET ADDRESS **P. O. Box 907** N/A
6.4 CITY-ST-ZIP **Tarpon Springs, FL 34688**

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:

Paula M. Nance

Paula M. Nance, Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/5/96

(941) 688-5563 x 122

CR2E037 (12/95)

Names of additional officers or directors:

D	BISHOP, Donald E., Jr.	11105 35th Court E. Parrish, FL 34219
D	GOSS, Theresa C.	1201 Macrae Ave. Clearwater, FL 34615
D	HINTZMAN, Morris E.	2001 N. Florida Ave. Tampa, FL 33602
D	MANN, Robert T.	P. O. Box 907 N/A Tarpon Springs, FL 34688-0907
D	REAMS, Hugh E.	P. O. Box 3542 N/A St. Petersburg, FL 33731
D	RUSH, Randolph J.	250 Park Ave., S. 5th Floor Winter Park, FL 32789
D	WITTEN, W. Dean	2125 E. South St. Orlando, FL 32803
E	MARSTON, Thomas W.	1140 E. McDonald St. Lakeland, FL 33801
AT	BERRY, Beverley C.	1140 E. McDonald St. Lakeland, FL 33801
AS	DONNELL, Ruth E.	1140 E. McDonald St. Lakeland, FL 33801

NOTE: E = Executive Director
 AT = Assistant Treasurer
 AS = Assistant Secretary