

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 29, 2002 8:00 am**  
**Secretary of State**

05-29-2002 93648 032 \*\*\*\*61.25

**DOCUMENT # 736582**

1. Entity Name

**NORTH UNITED METHODIST CHURCH OF SARASOTA, INC.**

Principal Place of Business

Mailing Address

**4726 N. TAMiami TRAIL  
 SARASOTA FL 34234**

**4726 N. TAMiami TRAIL  
 SARASOTA FL 34234**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-0818921**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DAVID G BOWMAN  
 22 S. TUTTLE AVE  
 SARASOTA FL 34237**

Name

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

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete  
 NAME CRANDFORD, BOBBY  
 STREET ADDRESS 1109 MAGELLAN DR  
 CITY-ST-ZIP SARASOTA FL 34243

TITLE PD ☐ Change ☒ Addition  
 NAME Serrie, Hal  
 STREET ADDRESS 636 Mecca Dr.  
 CITY-ST-ZIP Sarasota, FL 34234

TITLE VD ☐ Delete  
 NAME MARTIN, CHARLES  
 STREET ADDRESS 2212 22ND ST W  
 CITY-ST-ZIP BRANDON FL 34205

TITLE D ☒ Change ☐ Addition  
 NAME D  
 STREET ADDRESS Bradenton  
 CITY-ST-ZIP

TITLE D ☒ Delete  
 NAME EISNER, JIM  
 STREET ADDRESS 4116 4TH AVE NE  
 CITY-ST-ZIP BRANDENTON FL 34208

TITLE VD ☐ Change ☒ Addition  
 NAME Lyerly, Donald  
 STREET ADDRESS 7128 Pennsylvania Ave.  
 CITY-ST-ZIP Sarasota, FL 34243

TITLE D ☐ Delete  
 NAME STEVENS, JORITA  
 STREET ADDRESS 845 HIGHLAND ST  
 CITY-ST-ZIP SARASOTA, FL 00000 34234

TITLE D ☐ Change ☒ Addition  
 NAME Konen, Richard  
 STREET ADDRESS 8209 Cypress Lake Dr.  
 CITY-ST-ZIP Sarasota, FL 34243

TITLE D ☒ Delete  
 NAME STEWART, BILL  
 STREET ADDRESS 7343 ARCTURAS DR  
 CITY-ST-ZIP SARASOTA FL

TITLE D ☐ Change ☒ Addition  
 NAME Haley, Robert  
 STREET ADDRESS 4645 LaJolla Dr.  
 CITY-ST-ZIP Bradenton, FL 34210

TITLE S ☒ Delete  
 NAME CANNON, MARY L  
 STREET ADDRESS 6151 55TH AVE CIRCLE E  
 CITY-ST-ZIP BRADENTON FL

TITLE D ☐ Change ☒ Addition  
 NAME Goodfellow, William  
 STREET ADDRESS 2258 Lockwood Meadows  
 CITY-ST-ZIP Sarasota, FL 34234

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other I am empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)