

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 19, 2004 8:00 am
Secretary of State

08-19-2004 90054 007 ****61.25

DOCUMENT # 736582 1. Entity Name NORTH UNITED METHODIST CHURCH OF SARASOTA, INC.					
Principal Place of Business 4726 N. TAMiami TRAIL SARASOTA, FL 34234			Mailing Address 4726 N. TAMiami TRAIL SARASOTA, FL 34234		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-0818921	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent SCHAR, DAVID 520 CHIPPING LANE LONGBOAT KEY, FL 34228				7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ DATE _____					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	CT SCHAR, DAVID 520 CHIPPING LN LONGBOAT KEY, FL 34228	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	DT DOLL, ROBERT 722V ALDERWOOD DR SARASOTA, FL 34243	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	TM KERR, RICHARD 8225 LONGBAY BLVD SARASOTA, FL 342432007	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	T MITCHELL, MURLA 3045 LOCKWOOD LAKE CIR SARASOTA, FL 342347983	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DST STEVENS, JORITA 845 HIGHLAND ST SARASOTA, FL 00000, 34234	☒ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DVT MARTIN, CHARLES 2212 22ND ST W BRANDON, FL 34205	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	T GOODFELLOW, WM 2258 LOCKWOOD MEADOWS SARASOTA, FL 34234	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
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 like empowered.					
SIGNATURE: <u>Robert Doll</u> ROBERT DOLL 7/26/04					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					