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Feb 10 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 737811 (0)

1. Corporation Name  
THE FLORIDA UNITED METHODIST COMMITTEE FOR CHURCH DEVELOPMENT, INC.



Principal Place of Business: 122 E. McDONALD ST. LAKELAND FL 33801 US  
Mailing Address: P.O. BOX 1747 LAKELAND FL 33802-1747 US

3. Date Incorporated or Qualified: 01/12/1977  
3a. Date of Last Report: 02/06/1996

2. Principal Place of Business: 21 1140 E McDonald Street  
22 Suite, Apt. #, etc.

2a. Mailing Address: 26 P.O. Box 3767  
27 Suite, Apt. #, etc.

4. FEI Number: 59-0904361  
Applied For: Not Applicable

23 City & State: Lakeland FL

28 City & State: Lakeland FL

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Election Campaign Financing:  \$5.00 May Be Added to Fees

24 Zip: 33801  
25 Country: US

29 Zip: 33802  
30 Country: US

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COURTOY, CHARLES W  
1122 E. McDONALD ST.  
LAKELAND FL 33801

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable): 1140 E 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: *Charles W. Courtoy*

2/3/97

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

T BERRY, BEVERLEY  
1140 E MCDONALD ST.  
LAKELAND FL

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

PD BUTLER, PAUL B. JR.  
807 BEN LOMOND DR.  
TAMPA FL

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

D WARD, DARRELL E.  
4874 SHEARWATER LANE  
NAPLES FL

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

SD BALDWIN, WILLIAM L.  
115 E. HOWRY AVE.  
DELAND FL

4.1 TITLE: SD  
4.2 NAME: Rinaman, Kim  
4.3 STREET ADDRESS: 3661 San Jose Terrace  
4.4 CITY - ST - ZIP: Jacksonville FL 32217

AS HOLDEN BARBARA A.  
1122 E. McDONALD ST.  
LAKELAND FL

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS: 1140 E McDonald Street  
5.4 CITY - ST - ZIP: Lakeland FL 33801

DELETED

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do 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 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: *James B...*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-97 (813)281-1900  
Date Daytime Phone # 0052348

CR2E037 (9/96)