

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 23, 2000 8:00 am
Secretary of State

03-23-2000 90011 014 ****61.25

DOCUMENT # 741083

1. Entity Name

ENGLEWOOD UNITED METHODIST CHURCH, INC.

Principal Place of Business

Mailing Address

700 W DEARBORN ST
 ENGLEWOOD FL 34223
 US

170 W DEARBORN ST
 ENGLEWOOD FL 34223-3237
 US

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

59-1461291

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
 Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DUNKIN, DAVID A.
150 W. DEARBORN
ENGLEWOOD FL 34223

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
 FEES \$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 NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, ROGER 880 E SEVENTH STREET ENGLEWOOD FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD DYE, JEAN 9392 NEW MARTINSVILLE AVE. ENGLEWOOD FL 34224	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD ARNOLD, IRVIN 9221 SN BERNANDIO AVE. ENGLEWOOD FL 34223	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GOWING, DELMER 33 S. BUENA VISTA ENGLEWOOD FL 34223	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOOKE, BETH 150 MARINA ISLES DRIVE ENGLEWOOD FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDERSON, CARL 310 PENROSE CIRCLE ENGLEWOOD FL 34223	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD Larry Griffin 9392 New Martinsville Ave. Englewood, FL 34224	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD Carl Anderson 310 Penrose Circle Englewood, FL 34223	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Sylvia Hamilton 651 Michigan Ave. Englewood, FL 34223	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Don Sheppard 1065 Schooner Lane Englewood, FL 34224	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D John Booth 9484 Casa Grande Ave. Englewood, FL 34224	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Douglas Alexander 1637 Bayshore Drive Englewood, FL 34223	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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:

Lawrence M. Griffin LAWRENCE M. GRIFFIN 3/14/00

Date

Daytime Phone #

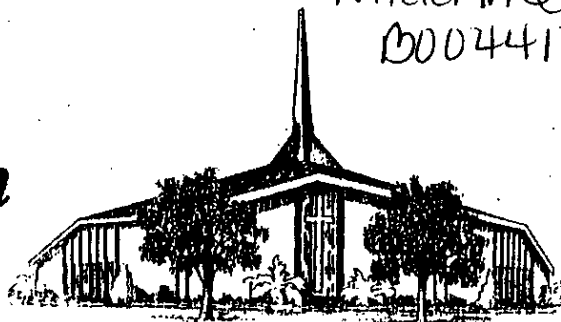
474-0094

141083

Attachment
00044137

Englewood United Methodist Church

700 E. Dearborn Street, Englewood, Florida 34223
Office: 941-474-5588 Fax: 941-475-2865



MINISTERS

Robert M. Gibbs

William D. Nelson

Janice Henry-Rinehart

**Pastor Emeritus
Samuel C. Seizert**

Englewood United Methodist Church - (Director's continued)

D
George Shaoff
680 S. Broadway
Englewood, FL 34223

(Addition)

D
Pat Starke
One N. Cayman Isle Blvd.
Englewood, FL 34223

D
Irvin Arnold
9221 San Bernadino Ave.
Englewood, FL 34223

D
Ruben Johnson
6425 Roberta Drive
Englewood, FL 3424

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