

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 FEB 15 PM 3:20

DOCUMENT # 757522 (8)

1. Corporation Name

UNITED METHODIST CHURCH OF SUN CITY CENTER, INC.

Principal Place of Business

Mailing Address

1210 DEL WEBB BLVD  
SUN CITY CNTR FL 33573

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SUN CITY CNTR FL 33573

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>04/13/1981</b>	3a. Date of Last Report <b>07/08/1994</b>
4. FEI Number <b>59-2131662</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ACKERMANN, PAUL  
1911 DEL WEBB BLVD. W.  
SUN CITY CENTER FL 33573

81 Name  
**SHELDON, ROBERT**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**2205 #K336 CANTERBURY LANE**  
83  
84 City  
**SUN CITY CENTER FL** 85 Zip Code  
**33573**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: *Robert K Sheldon, Chairman* DATE: **2-7-95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DC	ACKERMANN, PAUL 1911 DEL WEBB BLVD., W. SUN CITY CNTR FL	1.1 TITLE D/C SHELDON, ROBERT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ACKERMANN, PAUL	1.2 NAME	D/C SHELDON, ROBERT
STREET ADDRESS	1911 DEL WEBB BLVD., W.	1.3 STREET ADDRESS	2205 #K336 CANTERBURY LANE
CITY-ST-ZIP	SUN CITY CNTR FL	1.4 CITY-ST-ZIP	SUN CITY CENTER, FL. 33573
TITLE	DVC	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCBEE, HAROLD	2.2 NAME	
STREET ADDRESS	1909 DEL WEBB BLVD., E.	2.3 STREET ADDRESS	
CITY-ST-ZIP	SUN CITY CNTR, FL 00000	2.4 CITY-ST-ZIP	
TITLE	DS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERNARD, ALBERT	3.2 NAME	
STREET ADDRESS	2033 BERRY ROBERTS DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	SUN CITY CNTR FL	3.4 CITY-ST-ZIP	
TITLE	DT	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EVANS, COMLEY	4.2 NAME	DT DILLON, PORTER
STREET ADDRESS	1520 FT. DUQUESNA DR.	4.3 STREET ADDRESS	1605 NEW BEDFORD DRIVE
CITY-ST-ZIP	SUN CITY CNTR, FL 00000	4.4 CITY-ST-ZIP	SUN CITY CENTER, FL. 33573
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHANDLER, MARJORIE	5.2 NAME	D JORDAN, MARIAN
STREET ADDRESS	1527 FT. DUQUESNA DR.	5.3 STREET ADDRESS	2112 DEL WEBB BLVD E
CITY-ST-ZIP	SUN CITY CNTR, FL 00000	5.4 CITY-ST-ZIP	SUN CITY CENTER, FL. 33573
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHWINE, JANET	6.2 NAME	
STREET ADDRESS	1704 NEW BEDFORD DR.	6.3 STREET ADDRESS	
CITY-ST-ZIP	SUN CITY CNTR, FL 00000	6.4 CITY-ST-ZIP	

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 110.07(3)(A), 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 of changed, or on an Attachment with an address.

SIGNATURE: *Robert K Sheldon* ROBERT SHELDON 1/16/95