FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAR 10 PM 7:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **814702** **(7)**

1. Corporation Name

WOMAN'S DIVISION OF THE BOARD OF GLOBAL MINISTRIES OF THE UNITED METHODIST CHURCH

Principal Place of Business	Mailing Address
METHODIST CHURCH 475 RIVERSIDE DRIVE. RM 1503 NEW YORK N Y 10115	METHODIST CHURCH 475 RIVERSIDE DRIVE. RM 1503 NEW YORK N Y 10115

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/02/1960
3a. Date of Last Report: 02/02/1994
4. FEI Number: 13-5565087 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. *Nonprofit with IRS 501(c)(3)* Tax Exempt Status ☒ **$68.75** *Supplemental* Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	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
CRIST, MS. DOLLIE 100 CONCOURSE DR. TEQUESTA FL 33458	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	S	1.1 TITLE	Controller	☐ Change ☒ Addition
NAME	CUCKLER, NANCY L.	1.2 NAME	Betty Edwards	
STREET ADDRESS	4188 LANCASTER LANE	1.3 STREET ADDRESS	475 Riverside Drive	
CITY-ST-ZIP	KENT OH	1.4 CITY-ST-ZIP	New York, NY 10115	
TITLE	P	2.1 TITLE		☐ Change ☐ Addition
NAME	JOHNSON, CAROLYN E.	2.2 NAME		
STREET ADDRESS	2550 YEAGER ROAD 19-2	2.3 STREET ADDRESS		
CITY-ST-ZIP	WEST LAYFAYETTE IN	2.4 CITY-ST-ZIP		
TITLE	V	3.1 TITLE		☐ Change ☐ Addition
NAME	WILSON, RUTH ANN	3.2 NAME		
STREET ADDRESS	8282 CLARENCE LANE NORTH	3.3 STREET ADDRESS		
CITY-ST-ZIP	EAST AMHERST NY	3.4 CITY-ST-ZIP		
TITLE	V	4.1 TITLE		☐ Change ☐ Addition
NAME	BAGWELL, INELLE C.	4.2 NAME		
STREET ADDRESS	4109 STONY POINT	4.3 STREET ADDRESS		
CITY-ST-ZIP	AMARILLO TX	4.4 CITY-ST-ZIP		
TITLE	V	5.1 TITLE		☐ Change ☐ Addition
NAME	FOWLKES, NANCY L.	5.2 NAME		
STREET ADDRESS	107 VALLEY ROAD	5.3 STREET ADDRESS		
CITY-ST-ZIP	WHITE PLAINS NY	5.4 CITY-ST-ZIP		
TITLE	T	6.1 TITLE		☐ Change ☐ Addition
NAME	TAKAMINE, CONNIE J.	6.2 NAME		
STREET ADDRESS	475 RIVERSIDE DRIVE	6.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK FL	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 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: Betty J. Edwards 3/3/95 212-870-3743
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Betty J. Edwards, Controller

0079307