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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N08073

1. Corporation Name

FIRST UNITED CHURCH OF CHRIST OF JUPITER, FLORID A, CORPORATION

Principal Place of Business	Mailing Address
1475 INDIAN CREEK PKWY. (33458) JUPITER FL 33458	1475 INDIAN CREEK PKWY. (33458) JUPITER FL 33458

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 03/11/1985
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2500182 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

KAISER-CROSS, DAVID
10326 N. 158TH ST.
JUPITER FL 33478

10. Name and Address of New Registered Agent

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 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 _____
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		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	JOHNSON, BARRY L		1.2 NAME		
STREET ADDRESS	5900 RIVER ISLE DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL 33458		1.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	FLUSSER, LEANNE		2.2 NAME		
STREET ADDRESS	19800 PRICEWOOD DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL		2.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	HATFIELD, LYNN		3.2 NAME		
STREET ADDRESS	56 MAPLECREST CIR		3.3 STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL 33458		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	PASE, DICK		4.2 NAME		
STREET ADDRESS	19463 CAMP LANE		4.3 STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL		4.4 CITY-ST-ZIP		
TITLE	P	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	NEECE, GREG		5.2 NAME		
STREET ADDRESS	6562 WOODLOCH COURT		5.3 STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL		5.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	HIRSCH, SHEILA		6.2 NAME		
STREET ADDRESS	6238 LUCERNE ST		6.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418		6.4 CITY-ST-ZIP		

14. 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 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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 1/7/99 747-8340
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)