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Jan 28 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1997 1-28-97 B - 0939 C

DOCUMENT # N20520

(5)

1. Corporation Name

ST. JAMES UNITED METHODIST CHURCH, INC.

Principal Place of Business

Mailing Address

400 REID STREET  
PALATKA FL 32177-3734400 REID STREET  
PALATKA FL 32177-3734

3. Date Incorporated or Qualified

05/06/1987

3a. Date of Last Report

06/19/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City &amp; State

City &amp; State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLANDERS, JOE  
158 EAST RIVER ROAD  
EAST PALATKA FL 32131

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 C ☐ DELETE  
NAME FLANDERS, JOE  
STREET ADDRESS 158 EAST RIVER ROAD  
CITY - ST - ZIP EAST PALATKA FL 32131

TITLE S ☒ DELETE  
NAME ORTAGUS, JULIA  
STREET ADDRESS 2023 BRENTWOOD DR  
CITY - ST - ZIP PALATKA FL 32177

TITLE PC ☐ DELETE  
NAME SURINO, RIC  
STREET ADDRESS 101 REBECCA LANE  
CITY - ST - ZIP PALATKA FL 32177

TITLE D ☒ DELETE  
NAME MACGIBBON, TED  
STREET ADDRESS 419 EMMET STREET  
CITY - ST - ZIP PALATKA FL

TITLE D ☒ DELETE  
NAME BUCK, LYLE  
STREET ADDRESS 270 RIVER DRIVE  
CITY - ST - ZIP EAST PALATKA FL

TITLE T ☒ DELETE  
NAME WESTBURY, RICHARD  
STREET ADDRESS RT. 4, BOX 509  
CITY - ST - ZIP PALATKA FL 32177

11 TITLE S ☒ Change ☐ Addition  
12 NAME Hall, Jimmie  
13 STREET ADDRESS 179 Beechers Point  
14 CITY - ST - ZIP Welaka, FL 32193

21 TITLE D ☐ Change ☒ Addition  
22 NAME Torode, Bill  
23 STREET ADDRESS 257 River Drive  
24 CITY - ST - ZIP E. Palatka, FL 32131

31 TITLE D ☐ Change ☒ Addition  
32 NAME Hudson, Lucy  
33 STREET ADDRESS Rt. 1, Box 449-A  
34 CITY - ST - ZIP E. Palatka, FL 32131

41 TITLE D ☐ Change ☒ Addition  
42 NAME McKinley, John  
43 STREET ADDRESS Rt. 2, Box 1336  
44 CITY - ST - ZIP Palatka, FL 32177

51 TITLE D ☐ Change ☒ Addition  
52 NAME Walker, Punk  
53 STREET ADDRESS 2202 Laurel Street  
54 CITY - ST - ZIP Palatka, FL 32177

61 TITLE D ☐ Change ☒ Addition  
62 NAME MacGibbon, Sara Alice  
63 STREET ADDRESS 419 Emmett Street  
64 CITY - ST - ZIP Palatka, FL 32177

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone 8003597

CR2E037 (9/96)