# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N28358

1. Entity Name
BARTLEY TEMPLE UNITED METHODIST CHURCH, INC.

FILED
05 MAR 10 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| Principal Place of Business | Mailing Address |
|---|---|
| 1936 NE 8TH AVE<br>GAINESVILLE, FL 32641-4788 US | 1936 NE 8TH AVE<br>GAINESVILLE, FL 32641-4788 US |

02012005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2335194

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, HERMAN
1936 NE 8TH AVENUE
GAINESVILLE, FL 32641

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

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

**Filing Fee is $61.25**
**Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

600048868796
03/22/05--01040--018 **61.50

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | TD |
| NAME | MILES, EDWARD H |
| STREET ADDRESS | 2410 NE 12TH AVENUE |
| CITY-ST-ZIP | GAINESVILLE, FL 32641 |
| TITLE | SD |
| NAME | SMITH, MATTIE |
| STREET ADDRESS | 1123 NE 24TH STREET |
| CITY-ST-ZIP | GAINESVILLE, FL 32641 |
| TITLE | VD |
| NAME | KELLY , CHARLES |
| STREET ADDRESS | 4830 NE 3RD PLACE |
| CITY-ST-ZIP | GAINESVILLE, FL 32601 |
| TITLE | T |
| NAME | KETTLE, DAVID B |
| STREET ADDRESS | 3934 SW 26TH DRIVE |
| CITY-ST-ZIP | GAINESVILLE, FL 32608 |
| TITLE | PD |
| NAME | WILLIAMS, HERMAN |
| STREET ADDRESS | 823 NE 25TH TERR |
| CITY-ST-ZIP | GAINESVILLE, FL 32641 |
| TITLE | TD |
| NAME | STEWARD, ALBINA MS |
| STREET ADDRESS | 1326 NE 22ND AVE. |
| CITY-ST-ZIP | GAINESVILLE, FL 32641 |

DO NOT WRITE IN THIS SPACE

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:** Herman Williams March 8, 2005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #