FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # N29407 (6)

1. Corporation Name

FOREST UNITED METHODIST CHURCH, INC.

Principal Place of Business	Mailing Address
17635 EAST HIGHWAY 40 SILVER SPRINGS FL 32688	17635 EAST HIGHWAY 40 SILVER SPRINGS FL 32688

3. Date Incorporated or Qualified: 11/23/1988

3a. Date of Last Report: 02/16/1995

2. Principal Place of Business — 21:

Suite, Apt. #, etc. — 22:

City & State — 23:

Zip — 24: Country — 25:

2a. Mailing Address — 26:

Suite, Apt. #, etc. — 27:

City & State — 28:

Zip — 29: Country — 30:

4. FEI Number: 53-0002543 ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PENCE, HARRY L
17956 SE 28TH LN RD
SILVER SPRINGS FL 32688

10. Name and Address of New Registered Agent

81 Name: SIVERT, WILLIAM K

82 Street Address (P.O. Box Number is Not Acceptable): 1910 S.E. 170th Ave. Rd.

83:

84 City: SILVER SPRINGS **FL** 85 Zip Code: 34488

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 617.0505, Florida Statutes.

SIGNATURE: William K. Sivert — 01-26-96 (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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P PENCE, HARRY 17956 SE 28TH LANE RD. SILVER SPRINGS FL	☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	CHAIRMAN STEVENS, NOLAN 17475 S.E. 18th St. Silver Springs Fl. 34488	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS STEVENS, NOLAN 17475 S.E. 18TH ST. SILVER SPRINGS FL	☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	V. CHAIRMAN SIVERT, WILLIAM K 1910 S.E. 170th Ave. Rd. Silver Springs Fl. 34488	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST BALES, RUTH 14575 NE 21 ST #7 SILVER SPRINGS FL	☒ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	D HEALD, WILLIAM 2401 N.E. 36th PL. SILVER SPRINGS FL 34488	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD PENCE, HARRY 17956 SE 28TH LA RD SILVER SPRINGS FL	☒ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	SECRETARY HARMAN, IDA 14635 N.E. 186th PL SILVER SPRINGS FL 34488	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STADLBERGER, HENRY 13582 E. HWY 40 #300 SILVER SPRINGS FL	☒ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	D YOUNG, MARY 18039 S.E. 18 St SILVER SPRINGS FL 34488	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WEBSTER, ROBERT PO BOX 1298 N/A OCKLAWAHA FL	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (12/95)

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)(k), 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: William K. Sivert — WILLIAM K. SIVERT — 01-26-96 — (352)625-7833
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #