2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 8:00 am
Secretary of State
04-04-2005 90049 036 ****61.25

DOCUMENT # N29407

1. Entity 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

01192005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3379858 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DUBOIS, ED 2211 NE 115 AVE SILVER SPRINGS, FL 34488	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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

Filing Fee is $61.25
Due by May 1, 2005

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CT DUBOIS, ED 2211 NE 115 AVE SILVER SPRINGS, FL 34488	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S DuBois, Ed 2211 NE 115th Ave. Silver Springs, FL 34488	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC SIVERT, CLARA 1910 SW 170 AVENUE RD OCKLAWAHA, FL 32179	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Tabarrini, Joe 551 SE 129 Ct. Silver Springs, FL 34488	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LAIL, TINA 2170 S.E. 172ND TER SILVER SPRINGS, FL 34488	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Ward, Doug 2030 SE 171st. Ct. Silver Springs, FL 34488	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D REDMON, JIM 18650 SE 53RD PLACE OCKLAWAHA, FL 32179	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/Stewart, Holly 1754 SE 169 Ter. Rd. Silver Springs, FL 34488	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CANTRELL, WILLIAM 2200 S.E. 175TH TER SILVER SPRINGS, FL 34488	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/Decker, Barry 511 SE 180th Ave. Ocklawaha, FL 32179	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BINGHAM, TOM 4994 S.E. 180TH TER OCKLAWAHA, FL 32179	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C/Bingham, Tom 4994 SE 180th Ter. Ocklawaha, FL 32179	☑ Change ☐ Addition

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: Edgar W. DuBois 3/31/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #