

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2005 8:00 am
Secretary of State

02-15-2005 90021 018 ****61.25

DOCUMENT # N37940

1. Entity Name
MCCALL'S CHAPEL UNITED METHODIST CHURCH, INC.



Principal Place of Business
**7755 S. SR. 349
BRANFORD, FL 32008**

Mailing Address
**7755 S. SR. 349
BRANFORD, FL 32008**

50015427



01072005 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
75-2995453

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**TAYLOR, FRED M
7755 S. SR. 349
BRANFORD, FL 32008**

7. Name and Address of New Registered Agent

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 FRED M Taylor
Signature, typed or printed name of registered agent and title if applicable.

Fred M Taylor
(NOTE: Registered Agent signature required when reinstating)

1-18-05
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

TITLE PD ☐ Delete
NAME TAYLOR, FRED M
STREET ADDRESS 7755 S. SR. 349
CITY-ST-ZIP BRANFORD, FL 32008

TITLE C ☐ Delete
NAME WILLIAMS, CARL
STREET ADDRESS 4229 NW COURT
CITY-ST-ZIP BELL, FL 32619

TITLE T ☐ Delete
NAME BERBERETTE, MINNIE C
STREET ADDRESS BRYAN AVENUE LOT 40
CITY-ST-ZIP OLD TOWN, FL 23680

TITLE D ☒ Delete
NAME SUGGS, LARRY
STREET ADDRESS 170 SE HAWKS LN.
CITY-ST-ZIP BRANFORD, FL 32008

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME HELEN BETH POORE
STREET ADDRESS 1261 NE 340 Highway
CITY-ST-ZIP BRANFORD, FL 32008 32008

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Catherine Berberette
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/06/05
Date

352-210-0094
Daytime Phone #