

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N41141 (5)

1. Corporation Name

FIRST UNITED METHODIST CHURCH OF SARASOTA PROPERTIES, INC.

Principal Place of Business

Mailing Address

104 SO. PINEAPPLE AVE.
SARASOTA FL 34236

104 SO. PINEAPPLE AVE.
SARASOTA FL 34236

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/04/1990

3a. Date of Last Report

05/01/1994

4. FBI Number

65-0240218

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

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒ \$68.75 Supplemental
Fee Not Required

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REV. FRANK EDWARDS
104 S PINEAPPLE AVE
SARASOTA FL 34236

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature (Typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	PENINGTON, ALICE S.
STREET ADDRESS	2206 SUNNYSIDE LN.
CITY ST ZIP	SARASOTA FL
TITLE	VPD
NAME	HOWARD, ELIZABETH
STREET ADDRESS	4245 BOSWELL PL.
CITY ST ZIP	SARASOTA FL
TITLE	SD
NAME	RICE, JOHN M.
STREET ADDRESS	707 S. GULFSTREAM
CITY ST ZIP	SARASOTA FL
TITLE	TD
NAME	HERMAN, BILLIE
STREET ADDRESS	4935 KESTRAL PKWY. N.
CITY ST ZIP	SARASOTA FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

11 TITLE	☐ Change ☐ Addition
12 NAME	500001477185
13 STREET ADDRESS	-05/05/95--01043--012
14 CITY ST ZIP	****122.50 *****61.25
21 TITLE	VPD
22 NAME	D. L. Webber
23 STREET ADDRESS	5336 Charmes Ct.
24 CITY ST ZIP	Sarasota, FL. 34235
31 TITLE	SD
32 NAME	Dorothy M. Evans
33 STREET ADDRESS	5659 Pipers Waite
34 CITY ST ZIP	Sarasota, FL. 34235
41 TITLE	TD
42 NAME	William N. Rutledge
43 STREET ADDRESS	8017 Bobcat Circle
44 CITY ST ZIP	Sarasota, FL. 34238
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY ST ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY ST ZIP	

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:

Alice S. Penington

Alice S. Penington, President/Director

4-26-95

813 955-6994

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