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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

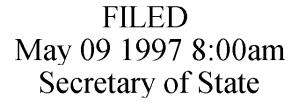
FIRST UNITED METHODIST CHURCH OF SARASOTA PROPER TIES, INC.

Principal Place of Business

Mailing Address

104 SO, PINEAPPLE AVE

104 SO. PINEAPPLE AVE





SARASOTA FL 34236		SARASOTA FL 34236-5727					
					3. Date Incorporated or Qualified 3a. [12/04/1990	Date of Las 05/01/	
	ace of Businoss	2a. Mailing Address			4. FEI Number		Applied For
21		26		65-0240218		Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional Required
City & State		City & State		-	6. Election Campaign Financing	· · · · · · · · · · · · · · · · · · ·	
23		28			Trust Fund Contribution		00 May Be ed to Fees
Zip	Country	Zip	Cour	itry	8. This corporation has liability for intangible	e tax undo	r s. 199.032,
24	25		30]		Florida Statutes Yes		
 	9. Name and Address of Curren	t Registered Agent		31 Name	10. Name and Address of New Registered	Agent	
WEBBER, D.L. 5336 CHARMES COURT SARASOTA FL 34235				Street Ad	David A. Johnson ddress (P.O. Box Number is Not Acceptable) 104 S. Pineapple Avenue		
			1	34 City	Sarasota F	85 Z	34236
11. Pursuant to the evolsions of Soctions 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the state of Forida 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 abilitations of, Section 617.0503, Florida Statutes.							
	signature, typeb or printed name of higister diage			Agent signature re	quired when reinstating) DATE		
12.		D DIRECTORS DELETE	13.	<u>, </u>	ADDITIONS/CHANGES TO OFFICERS AN President/Director	ND DIRECT	
NAME	PD Webber, D.L.	₹7 acces	1.4 111 1.2 NA		David A. Johnson	sets cuand	ge 🔲 Addition
STREET ADDRESS	5336 CHARMES COURT			EE1 ADDRESS	6426 Addington Place		
CITY-ST-ZIP	SARASOTA FL			r-S1-ZIP	University Park, F1 34201		
TITLE	SD SD	DELETE	2.4 TITI		VicePresident/Director	☐ Chang	e 😧 Addition
NAME	EVANS, DOROTHY M		2.2 NA		Harold Stinchcomb		, ,
STREET ADDRESS	5659 PIPERS WAITE			EE1 ADDRESS	4986 Vinson Way		
CITY-ST-ZIP	SARASOTA FL 34235			Y-ST-ZIP			
TITLE	TD	DELETE	3.1 1111		Sarasota, Fl. 34232 Secretary/Director	XX Chang	ge Addition
NAME	RUTLEDGE, WILLIAM N		3.P NAI	AE .	Edith Edens		
STREET ADDRESS	8017 BOBCAT CIRCLE		3.B STF	EE1 ADORESS	1750 Ben Franklin Dr., Apt	. 8-A	ŀ
CITY-ST-ZIP	SARASOTA FL 34238		3.4. CIT	Y-S1-2IP	Sarasota, Fl. 34236		
TITLE		DELETE	4.1 Till	.E	Treasurer/Director	XX Chang	ge Addition
NAME			4. 2 NA	ME	Charles Bouton		
STREET ADDRESS			4.8 STA	EET ADDRESS	4058 Via Mirada		
CITY-ST-ZIP				r - ST - ZIP	Sarasota, F1. 34238	··	
TITLE		☐ DELETE	5.4 TITI	.E	•	Chang	e 🔲 Addition
NAME			5.P NAI	ΛE			
STREET ADDRESS			5.B STA	EE1 ADDRESS			
CITY-ST-ZIP				r-ST-ZIP			
TITLE		☐ DELETE	6.1 TIT			☐ Chang	e 🔲 Addition
NAME			6.P NA				
STREET ADDRESS			6.B STF	EFT ADDRESS			
CITY-ST-ZIP	•		6.4 CIT	Y-S1-ZIP			

14. I do 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 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.