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Mar 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N44016 (6)

1. Corporation Name

EDGEWATER UNITED METHODIST CHURCH, INC.

Principal Place of Business

**18350 EDGEWATER DRIVE
MURDOCK FL 33948**

Mailing Address

**18350 EDGEWATER DRIVE
PORT CHARLOTTE FL 33948-7416
US**



3. Date Incorporated or Qualified
06/24/1991

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**DOSTER, BETTY G
14399 MADDOCK AVENUE
PT. CHARLOTTE FL 33953**

4. FEI Number
65-0235009

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

10. Name and Address of New Registered Agent

81 Name

WILTROUT, EDWARD C.

82 Street Address (P.O. Box Number is Not Acceptable)

18446 ELGIN AVENUE

83

84 City

PORT CHARLOTTE

FL

85 Zip Code
33948

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 617.0503, Florida Statutes.

SIGNATURE

Edward C. Wiltrout

CHAIRMAN BOARD OF TRUSTEE

3/11/97

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **TC** ☒ DELETE

NAME **DOSTER, BETTY G**
STREET ADDRESS **14399 MADDOCK AVENUE**
CITY-ST-ZIP **PT. CHARLOTTE FL**

TITLE **TC** ☒ DELETE

NAME **NEIMAN, JOHN**
STREET ADDRESS **772 FOREST HILL LANE**
CITY-ST-ZIP **PT CHARLOTTE FL**

TITLE **T** ☐ DELETE

NAME **KEITH HALFORD**
STREET ADDRESS **119 AURORA ST**
CITY-ST-ZIP **PT CHARLOTTE FL**

TITLE **T** ☒ DELETE

NAME **VIVA A. MCNEILL**
STREET ADDRESS **1214 DEWHURST ST**
CITY-ST-ZIP **PT CHARLOTTE FL**

TITLE **T** ☒ DELETE

NAME **NANCY TURNER**
STREET ADDRESS **27325 GUAPORE DR**
CITY-ST-ZIP **PT. CHARLOTTE FL**

TITLE **T** ☐ DELETE

NAME **MEYERS, GLENN**
STREET ADDRESS **19246 PINE BLUFF**
CITY-ST-ZIP **PT CHARLOTTE FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **TC** ☐ Change ☒ Addition

1.2 NAME **WILTROUT, EDWARD C**
1.3 STREET ADDRESS **18446 ELGIN AVENUE**
1.4 CITY-ST-ZIP **PT. CHARLOTTE FL**

2.1 TITLE **T** ☐ Change ☒ Addition

2.2 NAME **NEIMAN, SARAH**
2.3 STREET ADDRESS **1515 FORREST NELSON #E106**
2.4 CITY-ST-ZIP **PT. CHARLOTTE FL**

3.1 TITLE **T** ☐ Change ☒ Addition

3.2 NAME **BENNETT, MARGARET**
3.3 STREET ADDRESS **21351 BASSETT AVENUE**
3.4 CITY-ST-ZIP **PT. CHARLOTTE FL**

4.1 TITLE **T** ☐ Change ☒ Addition

4.2 NAME **MCGRAW, MARGARET**
4.3 STREET ADDRESS **2064 PELLAM BLVD.**
4.4 CITY-ST-ZIP **PT. CHARLOTTE, FL**

5.1 TITLE **T** ☐ Change ☒ Addition

5.2 NAME **DENTON, STANLEY**
5.3 STREET ADDRESS **22188 LASALLE ROAD**
5.4 CITY-ST-ZIP **PT. CHARLOTTE, FL**

6.1 TITLE **TC** ☐ Change ☒ Addition

6.2 NAME **DAHLKE, CHUCK**
6.3 STREET ADDRESS **18451 LOCKLANE AVENUE**
6.4 CITY-ST-ZIP **PT. CHARLOTTE, FL**

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.

CR2E037 (9/96)

TRUSTEE'S FOR 1997

ADDITIONAL NAME FOR NON-PROFIT ORGANIZATION FILING:

Title: T
Name: BUTLER, FRANK
Address: 21296 HIGGS DRIVE, N.E.
PT. CHARLOTTE, FL