

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 MAR -6 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N46154 (3)

1. Corporation Name

SUMMIT PARK UNITED METHODIST CHURCH, INC.

Principal Place of Business

Mailing Address

3300 SUMMIT BLVD
PENSACOLA FL 32503

3300 SUMMIT BLVD
PENSACOLA FL 32503

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/21/1991

3a. Date of Last Report
03/31/1994

4. FEI Number

NOT APPLICABLE

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.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GLOVER, ROBERT
3458 CRABTREE CHURCH ROAD
CANTONMENT FL 32533

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	GLOVER, RB JR
STREET ADDRESS	3300 SUMMIT BLVD
CITY-ST-ZIP	PENSACOLA FL
TITLE	V
NAME	LAW, SHIRLEY
STREET ADDRESS	3300 SUMMIT BLVD
CITY-ST-ZIP	PENSACOLA FL
TITLE	ST
NAME	NORTHUP, PATTY
STREET ADDRESS	3300 SUMMIT BLVD
CITY-ST-ZIP	PENSACOLA FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE	T	☐ Change ☒ Addition
1.2 NAME	Blane Patroustson	
1.3 STREET ADDRESS	3300 Summit Boulevard	
1.4 CITY-ST-ZIP	Pensacola, FL 32503	
2.1 TITLE	T	☐ Change ☒ Addition
2.2 NAME	Tom Godwin	
2.3 STREET ADDRESS	3300 Summit Boulevard	
2.4 CITY-ST-ZIP	Pensacola, FL 32503	
3.1 TITLE	T	☐ Change ☒ Addition
3.2 NAME	Jerry Diamond	
3.3 STREET ADDRESS	3300 Summit Boulevard	
3.4 CITY-ST-ZIP	Pensacola, FL 32503	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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: *Robert Glover Jr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Name #