2000 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 23, 2000 8:00 am Secretary of State DOCUMENT # **N49159** 1. Entity Name FIRST UNITED METHODIST CHURCH OF BOWLING GREEN. 03-23-2000 90030 042 ****70.00 Mailing Address Principal Place of Business P.O. BOX 236 4910 N. CHURCH ST BOWLING GREEN FL 33834-0236 **BOWLING GREEN FL 33834** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 59-1520571 Not Applicable Country-\$8.75 Additional -- Zip --- - ---Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CRANFORD JOE dress (P.O. Box Number is Not Acceptable) CRANFORD, JOE TROY SMITH ROAD **BOWLING GREEN FL 33834** Zip Code 33834 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Department of State FEE IS \$61.25 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition ☐ Delete TITLE TITLE NAME CRANFORD, JOE NAME 894 DOC COIL ROAD STREET ADDRESS STREET ADDRESS 2981 TROY SMITH ROAD CITY-ST-ZIP CITY-ST-ZIP **BOWLING GREEN FL 33834** ☐ Addition Change TITLE VD. ☐ Delete TITLE NAME NAME DURRANCE, DANNY 3067 COLLEGE HILL ROAD STREET ADDRESS STREET ADDRESS 3067 OLLEGE HILL ROAD CITY-ST-7IP CITY-ST-ZIP **BOWLING GREEN FL 33834** Change ☐ Addition TITLE TD ☐ Delete TITLE NAME WATSON, SUSAN NAME STREET ADDRESS 3370 METHODIST CHURCH ROAD STREET ADDRESS CITY-ST-7IP BOWLING GREEN, FL CITY-ST-ZIP **BWOLING GREEN FL 33834** ☐ Change ☐ Addition TITLE SD ☐ Defete TITLE NAME NAME DURRANCE, JULIE STREET ADDRESS STREET ADDRESS 3067 COLLEGE HILL ROAD CITY-ST-ZIP CITY-ST-7IP **BOWLING GREEN FL 33834** ☐ Delete TITLE ☐ Change Addition TITLE JONES, JOE NAME 316 EAST COUNTY LINE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOWLING GREEN, FL TITLE ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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)(i). 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.