

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90048 006 ****70.00

DOCUMENT # N49159

1. Entity Name
**FIRST UNITED METHODIST CHURCH OF BOWLING
GREEN, INC.**



Principal Place of Business
**4910 N. CHURCH ST
BOWLING GREEN, FL 33834 US**

Mailing Address
**P.O. BOX 236
BOWLING GREEN, FL 33834-0236**

40060011



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01242007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-1520571

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CRANFORD, JOE
894 DOC COIL RD
BOWLING GREEN, FL 33834**

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

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

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME ADLER, CHARLES
STREET ADDRESS P.O. BOX 276-W HWY 664
CITY-ST-ZIP BOWLING GREEN, FL 33834

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME ALDERMAN, ROY
STREET ADDRESS P.O. BOX 756, 541 E MAIN STREET
CITY-ST-ZIP BOWLING GREEN, FL 33834

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☒ Delete
NAME BARDEN, BECKIE
STREET ADDRESS P.O. BOX 2524
CITY-ST-ZIP WAUCHULA, FL 33873

TITLE ☒ Change ☒ Addition
NAME Treasurer
STREET ADDRESS Gayle Smith
CITY-ST-ZIP 1495 Dena Circle
Wauchula FL 33873

TITLE SD ☐ Delete
NAME DRISKELL, DENICE
STREET ADDRESS 1466 SR 62
CITY-ST-ZIP BOWLING GREEN, FL 33834

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE M ☐ Delete
NAME CRANFORD, JOE
STREET ADDRESS 894 DOC COIL RD.
CITY-ST-ZIP BOWLING GREEN, FL 33834

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:

Joseph L. Cranford Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-07 863-781-2330
Date Daytime Phone #