

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 14, 2008 8:00 am**  
**Secretary of State**

01-14-2008 90099 034 \*\*\*\*70.00

<b>DOCUMENT # N49419</b> 1. Entity Name <b>THE FIRST UNITED METHODIST CHURCH OF NAPLES, FLORIDA, INC.</b>					
Principal Place of Business <b>388 FIRST AVENUE SOUTH NAPLES, FL 34102 US</b>				Mailing Address <b>388 FIRST AVENUE SOUTH NAPLES, FL 34102 US</b>	
2. Principal Place of Business - No P.O. Box # <b>388 FIRST AVE. South</b>		3. Mailing Address <b>388 FIRST AVE. South</b>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State <b>NAPLES, FL</b>		City & State <b>NAPLES, FL</b>		4. FEI Number <b>59-0823942</b>	
Zip <b>34102</b>		Country <b>COLLIER</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent  <b>LEWIS, RONAGO</b> <b>4937 SAN PABLO CT</b> <b>NAPLES, FL 34109</b>			7. Name and Address of New Registered Agent  Name <b>RONALD W. LEWIS</b> Street Address (P.O. Box Number is Not Acceptable) <b>4937 SAN PABLO CT.</b> City <b>NAPLES</b> FL Zip Code <b>34109</b>		
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. <b>CHAIRMAN FOR TRUSTEES FIRST UNITED METHODIST CHURCH</b> SIGNATURE <b>Ronald W Lewis</b> <span style="float: right;">1/9/08</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SUNYOE, RONALD E 4505 BEECHWOOD LAKE DR NAPLES, FL 34112	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FC PROFF, JOHN 600 CORAL DR NAPLES, FL 34102	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BRUSE, KINSSEN 4795 SAN CARLO CT NAPLES, FL 34109	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUNYOG, RONALD E 4505 BEECHWOOD LAKE DRIVE NAPLES, FL 34112	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RONALD LEWIS 4937 SAN PABLO CT NAPLES, FL 34109	<input type="checkbox"/> Delete			
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