

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N51299** (8)
1. Corporation Name
CHRIST UNITED METHODIST CHURCH OF TAMPA, INC.



Principal Place of Business 3304 E COLUMBUS DR TAMPA FL 33605	Mailing Address 3304 E COLUMBUS DR TAMPA FL 33605
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3. Date Incorporated or Qualified 10/15/1992	
4. FEI Number 65-3891358	Applied For <input type="checkbox"/> Yes <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent CHRISTOPHER, JOHN 4806 ASHLAND DRIVE TAMPA FL 33610	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	CD <input type="checkbox"/> DELETE
NAME	CHRISTOPHER, JOHN
STREET ADDRESS	4806 ASHLAND DRIVE
CITY-ST-ZIP	TAMPA FL 33610
TITLE	TD <input type="checkbox"/> DELETE
NAME	JOINER, THOMAS
STREET ADDRESS	5428 PINE STREET
CITY-ST-ZIP	SEFFNER FL 33584
TITLE	SD <input type="checkbox"/> DELETE
NAME	PONDER, ERNESTINE
STREET ADDRESS	3409 MACHADO STREET
CITY-ST-ZIP	TAMPA FL 33605
TITLE	D <input type="checkbox"/> DELETE
NAME	HENDRIX, EMMA
STREET ADDRESS	3406 EAST 33RD AVE
CITY-ST-ZIP	TAMPA FL 33610
TITLE	VD <input type="checkbox"/> DELETE
NAME	RAINES, WILLIAM
STREET ADDRESS	4832 ASHLAND DRIVE
CITY-ST-ZIP	TAMPA FL 33610
TITLE	D <input type="checkbox"/> DELETE
NAME	HARMON, MOSES
STREET ADDRESS	4405 ATWOOD
CITY-ST-ZIP	TAMPA FL 33610

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 _____ 2/2/98 013/21-3775

CR2E037 (10/97)