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Jan 29 1997 8:00am

Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000002430 (7)

1. Corporation Name

FERRY PASS UNITED METHODIST CHURCH, INC.



Principal Place of Business

Mailing Address

7300 N DAVIS HWY
PENSACOLA FL

7300 N DAVIS HWY
PENSACOLA FL 32504-6314

3. Date Incorporated or Qualified
05/28/1993

3a. Date of Last Report
03/06/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

4. FEI Number
59-3282863

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MOORHEAD, STEPHEN R
4300 BAYOU BLVD
SUITE 12
PENSACOLA FL 32503

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 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

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 D ☐ DELETE
NAME CLARK, CHARLES E
STREET ADDRESS 5248 RIDGEFIELD RD
CITY-ST-ZIP PENSACOLA FL 32514

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME Jean Barnett
1.3 STREET ADDRESS 109 Savannah St.
1.4 CITY-ST-ZIP Pensacola, FL 32503

TITLE D ☐ DELETE
NAME CRAWFORD, LEONARD
STREET ADDRESS 7722 NORTHPOINTE BLVD
CITY-ST-ZIP PENSACOLA FL

2.1 TITLE D ☐ Change ☐ Addition
2.2 NAME Smith, Ray
2.3 STREET ADDRESS 810 E. Bloodworth Ln.
2.4 CITY-ST-ZIP Pensacola, FL 32504

TITLE D ☐ DELETE
NAME WIGGINS, LOIS
STREET ADDRESS 6133 AUDUBON DR
CITY-ST-ZIP PENSACOLA FL

3.1 TITLE D ☐ Change ☒ Addition
3.2 NAME Dumas, Grady
3.3 STREET ADDRESS 1001 Vernon St
3.4 CITY-ST-ZIP Pensacola, FL 32504

TITLE DT ☐ DELETE
NAME PEACOCK, ADRIANA
STREET ADDRESS 2371 LE RUTH DR
CITY-ST-ZIP PENSACOLA FL 32514

4.1 TITLE D ☐ Change ☒ Addition
4.2 NAME Hall, Carolyn
4.3 STREET ADDRESS 810 E. Bloodworth Ln.
4.4 CITY-ST-ZIP Pensacola, FL 32504

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE D ☐ Change ☒ Addition
5.2 NAME Smith, Ray
5.3 STREET ADDRESS 7930 Hilburn Rd.
5.4 CITY-ST-ZIP Pensacola, FL 32514

TITLE ☐ DELETE
NAME
STREET ADDRESS
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 does not qualify for the exemption stated in Section 119.07(3)(i), 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.

CR2E037 (9/96)