

02221999-90067-018-\$61.25-\$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N93000003079					
1. Corporation Name FIRST UNITED METHODIST CHURCH OF HAINES CITY, FL A., INC.					
Principal Place of Business 21 S. SECOND ST. HAINES CITY FL 33844			Mailing Address 21 S. SECOND ST. HAINES CITY FL 33844		
2. Principal Place of Business 21 Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. City & State Zip Country		3. Date Incorporated or Qualified 07/02/1993	
21 22 23 24		26 27 28 29		4. FEI Number 59-1573252 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent HALLMAN, DOUGLAS F 1917 PENNSULAR DRIVE HAINES CITY FL 33844			10. Name and Address of New Registered Agent 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 _____ DATE _____ Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when re-registering)					
12. OFFICERS AND DIRECTORS ☐ DELETE TITLE NAME STREET ADDRESS CITY-ST-ZIP 1. WINCHESTER, ED 218 CREST DR. HAINES CITY FL 33844 2. WORKMAN, BARBARA 2900 POWERLINE RD. #300 HAINES CITY FL 33844 3. RICHARDSON, RALPH 63 PINE FOREST DR. HAINES CITY FL 33844 4. BRADLEY, HERBERT 43 UNCLE PETE RD. HAINES CITY FL 33844 5. PRATT, JEAN 101 FAIRWAY DR. HAINES CITY FL 33844 6. WILLIAMS, CHARLES 215 S. FIRST ST. HAINES CITY FL 33844			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 61 TITLE 62 NAME 63 STREET ADDRESS 64 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)(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 as an attachment with an address, with all other life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Herbert Bradley, DISTRICT DIRECTOR

Douglas F. Hallman 1/12/99 4221290

Date

Lifetime Photo

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