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**APPROVED
AND
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1995 MAY -1 AM 9:58

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # N94000001239 (2)

1. Corporation Name

PEACE UNITED METHODIST CHURCH, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

700001491867

-05/17/95-01144-003

*****68.75 *****68.75

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

12755 SW 200 ST
MIAMI FL 33177

12755 SW 200 ST
MIAMI FL 33177

3. Date Incorporated or Qualified

03/09/1994

3a. Date of Last Report

4. FEI Number

65-0489952

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

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

81 Name

LEE R. NAIMAN

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

9360 SW 190 ST

83

84 City

MIAMI

FL

85 Zip Code

33157

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, 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
NAME
STREET ADDRESS
CITY - ST - ZIP
CD
OHLZEN, RON
12975 SW 186 TERR
MIAMI FL 33177

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
T
ELINOR OHLZEN
12975 SW 186 TERR
MIAMI, FL 33177
☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
NAIMAN, LEE R
9360 SW 190 ST
MIAMI FL 33157

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
PARKER, MARGARET
19820 SW 127 CT
MIAMI FL 33177

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
MANSFIELD, SADIE
6600 SW 83 AVE
MIAMI FL 33143

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
HEFFREON, RICK
15750 SW 184 ST
MIAMI FL 33187

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
HEFFREON, RICK
15750 SW 184 TERR
MIAMI FL 33187

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
D
HEFFREON, RICK
15750 SW 184 TERR
MIAMI FL 33187
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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, on an attachment with an address

SIGNATURE:

LEE R. NAIMAN

Date

Signature