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Apr 10 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 # N96000002188 (8)

1. Corporation Name

SUN CITY CENTER UNITED METHODIST CHURCH SAMARITA  
N FUND, INC.

Principal Place of Business

Mailing Address

1210 DEL WEBB  
SUN CITY CENTER FL 33573

1210 DEL WEBB  
SUN CITY CENTER FL 33573-5224



3. Date Incorporated or Qualified  
04/18/1996

3a. Date of Last Report

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 25

29 30

4. FEI Number

Applied For

59-3377071

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

NYMARK, DENNIS V  
110 S. PEBBLE BEACH BLVD.  
SUN CITY CENTER FL 33573

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 re-nating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME BARTLEY, HAROLD W  
STREET ADDRESS 1210 DEL WEBB  
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE DV  
NAME BOHON, SAM  
STREET ADDRESS 1210 DEL WEBB  
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE DS  
NAME WOOD, LEE  
STREET ADDRESS 1210 DEL WEBB  
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE DT  
NAME MOREFIELD, CLARENCE  
STREET ADDRESS 1210 DEL WEBB  
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE D  
NAME MCCLELLAND, LLOYD  
STREET ADDRESS 803 OJAI AVE.  
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE DV  
NAME DAVIES, MARION  
STREET ADDRESS 302 CANTON CT., #C-70  
CITY-ST-ZIP SUN CITY CENTER FL 33573

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Dugravich, William  
1.2 NAME  
1.3 STREET ADDRESS 1210 Del Webb  
1.4 CITY-ST-ZIP Sun City Center, Fl. 33573

2.1 TITLE D  
2.2 NAME Sprague, Asa  
2.3 STREET ADDRESS 1210 Del Webb  
2.4 CITY-ST-ZIP Sun City Center, Fl. 33573

3.1 TITLE D  
3.2 NAME Halm, Sala  
3.3 STREET ADDRESS 1210 Del Webb  
3.4 CITY-ST-ZIP Sun City Center, Fl. 33573

4.1 TITLE D  
4.2 NAME Bartley, Beatrice  
4.3 STREET ADDRESS 1210 Del Webb  
4.4 CITY-ST-ZIP Sun City Center, Fl. 33573

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

6.1 TITLE  
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.

SIGNATURE: Harold W. Bartley, President, Sun City Center

3-8-97 012-123-1217

CR2E037 (9/96)