1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9600006631

VENUS UNITED METHODIST CHURCH, INC.

Country

Principal Place	of	Busines
000 00 701		

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Mailing Address

962 CR 731 VENUS FL 33960

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22

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Zip

962 CR 731 VENUS FL 33960

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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FILED May 05, 1999 8:00 am[§] Secretary of State

05-05-1999 90012 026 ****61.25

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable



3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

12/31/1996

59-1835239

4. FEI Number

4	25	29	30			Trust Fund Contribution	Added to	Fees
	9. Name and Address of Currer	t Registered Agent	1			10. Name and Address of New Reg	stered Agent	
				81 1	Name			
DIDOE (1)	/1 \ /1 &				n	(C.O. F North - in North Assessments	· · · · · · · · · · · · · · · · · · ·	
BIRGE, S				82	Street Addi	ress (P.O. Box Number is Not Acceptable	,	
1367 C.R.				83				
venus fi	_ 33960							
				84	City		FL 85 Zip Co	ebc
		0 017 4500 51	Ctatulas the	obouto 5	omed corr	poration submits this statement for the put		egistered
office or r	to the provisions of Sections 617.050 egistered agent, or both, in the State in familiar with, and accept the obligation.	of Florida. Such change '	was authorize	ed by the	e corporati	on's board of directors. I hereby accept the	e appointment as regi	istered
SIGNATURE			٠,				DATE	
<u> </u>	Signature, typed or printed name of registered age		<u> </u>		gnature require	ADDITIONS/CHANGES TO OFFIC		S IN 12
12.	OFFICERS AN	D DIRECTORS	13			ADDITIONS/CHANGES TO OT TO	Change	Addition
TITLE	1	□ nere		TITLE	ĺ		- cura-a	
NAME	CLARK, DANIEL GENE		1.2	NAME				
STREET ADDRESS	210 QUAIL RUN		1.3	STREET AL	DDRESS			
CITY-ST-ZIP	VENUS FL		1.4	CITY-ST-Z	IP			—
TITLE	T	☐ DELE	TE 2.1	TITLE			☐ Change	☐ Addition
NAME	BIRGE, WALLACE		2.2	NAME				
STREET ADDRESS	1367 C.R. 731		2.3	STREET AL	DORESS		7	·
CITY+ST-ZIP	VENUS FL		2. 4	CITY-ST-	ZIP			
TITLE	T	DELE	TE 3.1	TITLE			☐ Change	Addition
NAME	LOTT, CLARICE		3.2	NAME				
STREET ADDRESS	** ***********		3.3	STREET AL	DORESS			
	VENUS FL			CITY-ST-	Ţ			
TITLE	VENUS FL	☐ DELE		TITLE	<u> </u>		☐ Change	Addition
			1	NAME				
NAME			1 "-	STREET AL	nnoess			
STREET ADDRESS								
CITY-ST-ZIP		□ DELE		CITY-ST-Z	-1F		Change	Addition
TITLE				NAME	}		V	
NAME			1	STREET AL	DOBESS			
STREET ADDRESS				CITY-ST-2	- 1			
CITY-ST-ZIP		[] acre		TITLE	ur		Change	Addition
TITLE		☐ DELE	-''-					
NAME				NAME				
STREET ADDRESS				STREET A				
CITY-ST-ZIP				CITY-ST-2	1			
14. I hereby	certify that the information supplied w	ith this filing does not qua	alify for the ex	emption	stated in	Section 119.07(3)(i), Florida Statutes. I fure shall have the same legal effect as if m	rther certify that the in	tormation am an

Country

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am all 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, with all other like empowered.

SIGNATURE:

4-28-99 941-465-5043
Date Date Davime Phone #