

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2001 8:00 am
Secretary of State

03-14-2001 90471 045 ****61.25

DOCUMENT # N97000000843

1. Entity Name

ARCHER FIRST UNITED METHODIST CHURCH, INC.

Principal Place of Business

**400 W. CHURCH BLVD.
 ARCHER FL 32618**

Mailing Address

**P.O. BOX 156
 ARCHER FL 32618**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2748430

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~**BOULWARE, ANN B
 7404 SW 107TH ST
 GAINESVILLE FL 32608**~~

Name **Bill Gurley**

Street Address (P.O. Box Number is Not Acceptable)
2001 SW 16th St Apt A3

City **Gainesville**

FL

Zip Code **32608**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE *William B. Gurley* **William B. Gurley**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/25/01
 DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **C** ☒ Delete
 NAME **BOULWARE, ANN B**
 STREET ADDRESS **7404 SW 107TH ST**
 CITY-ST-ZIP **GAINESVILLE FL 32608**

TITLE **C** ☐ Change ☒ Addition
 NAME **Gurley, Bill**
 STREET ADDRESS **2001 SW 16th St. Apt A3**
 CITY-ST-ZIP **Gainesville, FL 32608**

TITLE **P** ☐ Delete
 NAME **BATEY, BRETT**
 STREET ADDRESS **108 W HIGH ST**
 CITY-ST-ZIP **ARCHER FL 32618**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **T** ☒ Delete
 NAME **CAUDRON, ARMAND**
 STREET ADDRESS **105 E. CHURCH ST**
 CITY-ST-ZIP **ARCHER FL 32618**

TITLE **T** ☐ Change ☒ Addition
 NAME **Free, Lamar**
 STREET ADDRESS **10151 NE 48 Lane**
 CITY-ST-ZIP **Bronson, FL 32621**

TITLE **T** ☒ Delete
 NAME **HAMILTON, HOMER**
 STREET ADDRESS **100 S. UNIVERSITY BLVD.**
 CITY-ST-ZIP **ARCHER FL 32618**

TITLE **T** ☐ Change ☒ Addition
 NAME **Free, Martie**
 STREET ADDRESS **10151 NE 48 Lane**
 CITY-ST-ZIP **Bronson, FL 32621**

TITLE **T** ☒ Delete
 NAME **HELLMAN, LAWRENCE**
 STREET ADDRESS **101 E CENTRAL AVE**
 CITY-ST-ZIP **ARCHER FL 32618**

TITLE **T** ☐ Change ☒ Addition
 NAME **LaBore, A.J.**
 STREET ADDRESS **1907 SW 179th Place**
 CITY-ST-ZIP **Archer, FL 32618**

TITLE **CCD** ☐ Delete
 NAME **PADGETT, MASON**
 STREET ADDRESS **14236 SW 100TH AVE.**
 CITY-ST-ZIP **ARCHER FL 32618**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William B. Gurley* **William B. Gurley** **2/25/01** **(352)392-1568**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)