

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90136 005 ****61.25

DOCUMENT # N97000003204

1. Entity Name

FIRST UNITED METHODIST PRE-SCHOOL, INC.



Principal Place of Business
**1500 SOUTH KANNER HIGHWAY
STUART FL 34996**

Mailing Address
**P.O. BOX 539
STUART FL 34996**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0714099**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**FARROW, SUE
1500 SOUTH KANNER HIGHWAY
STUART FL 34996**

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPAHN, DEBBIE 5675 SW NAPP RD PALM CITY FL 34990	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RIEGELSBERGER, JENNIFER 2047 S W DANFORTH CIRCLE PALM CITY FL 34990	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TRAISTER, RICHARD 1421 SW VIZCAYA CR PALM CITY FL 34990	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLOUNT, DEE 1360 SANDPIPER LN STUART FL 34996	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DONALD, MARK MAC 10 CENTRAL PKWY STE 130 STUART FL 34994	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DALY, FRANK 5547 SW CORAL TREE LANE PALM CITY FL 34990-8535	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D David Merrill 373 SW Nativity Terr, Pt. St. Lucie, FL 34984	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Laurie Moore 5505 SE Martin Meadow Stuart, FL 34997	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Cheryl Gehron 5401 SE Meadow Spring Stuart, FL 34997	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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:

Frank P. Daly **Frank P. Daly** **2/4/03** **772 287 6263**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)