

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700788

Entity Name: MERRELL UNITED METHODIST CHURCH, INC.**Current Principal Place of Business:**3900 N STATE RD 7
LAUDERDALE LAKES, FL 33319-1877**Current Mailing Address:**3900 N STATE RD 7
LAUDERDALE LAKES, FL 33319-1877**FEI Number:** 59-1099703**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COOMBS, FRANKLYN
3900 N STATE RD 7
LAUDERDDALE LKS, FL 33319 US*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:** FRANKLYN COOMBS

04/12/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name COOMBS, FRANKLYN
Address 3900 N STATE RD 7
City-State-Zip: LAUDERDALE LAKES FL 33319-1877

Title SECRETARY, DIRECTOR
Name SMITH, LORNA
Address 3900 N. STATE ROAD 7
 C/O MERRELL UNITED METHODIST
 CHURCH
City-State-Zip: LAUDERDALE LAKES FL 33319

Title DIRECTOR
Name BERRY, BARRINGTON
Address 3900 N STATE RD 7
City-State-Zip: LAUDERDALE LAKES FL 33319-1877

Title TREASURER, DIRECTOR
Name SHOMERS, DAVID W
Address 3900 N STATE RD 7
City-State-Zip: LAUDERDALE LAKES FL 33319-1877

Title VP, DIRECTOR
Name FORBES, RONDON
Address 3900 N. STATE ROAD 7
 C/O MERRELL UNITED METHODIST
 CHURCH
City-State-Zip: LAUDERDALE LAKES FL 33319

Title DIRECTOR
Name GRACE, HERRON
Address 3900 N. STATE ROAD 7
 C/O MERRELL UNITED METHODIST
 CHURCH
City-State-Zip: LAUDERDALE LAKES FL 33319

Title DIRECTOR
Name MCGEECHY, VIVIAN
Address 3900 N. STATE ROAD 7
 C/O MERRELL UNITED METHODIST
 CHURCH
City-State-Zip: LAUDERDALE LAKES FL 33319

Title DIRECTOR
Name TUCKER, MARCELL
Address 3900 N. SR 7
City-State-Zip: LAUDERDALE LAKES FL 33319

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DAVID W SHOMERS

TREASURER/DIRECTOR 04/12/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MARTIN, STANLEY
Address	3900 N. SR. 7
City-State-Zip:	LAUDERDALE LAKES FL 33319