

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 704307

**Entity Name:** UNITED METHODIST TEMPLE, LAKELAND, INC.

**Current Principal Place of Business:**

2700 SOUTH FLORIDA AVE  
LAKELAND, FL 33803

**Current Mailing Address:**

2700 SOUTH FLORIDA AVE  
LAKELAND, FL 33803

**FEI Number: 59-6044079**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

ALLEN, PHILIP O  
1701 S FLORIDA AVE  
LAKELAND, FL 33801 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title T  
Name BOWNE, DOUGLAS  
Address 1029 E HIGHLAND DRIVE  
City-State-Zip: LAKELAND FL 33813

Title D  
Name WARD, JOHN  
Address 5135 DORMAN RD  
City-State-Zip: LAKELAND FL 33813

Title PRESIDENT  
Name BENNINGFIELD, JAY  
Address 320 W POINSETTIA  
City-State-Zip: LAKELAND FL 33803

Title TREASURER  
Name URQUHART, LOUISE R  
Address 4918 COLONNADES CIRCLE W  
City-State-Zip: LAKELAND FL 33811

*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: LOUISE URQUHART**

**ADMIN. ASST.**

**01/10/2017**

Electronic Signature of Signing Officer/Director Detail

Date