

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N44016

**Entity Name:** EDGEWATER METHODIST CHURCH, INC.

**Current Principal Place of Business:**

19190 COCHRAN BLVD  
PORT CHARLOTTE, FL 33948

**Current Mailing Address:**

19190 COCHRAN BLVD  
PORT CHARLOTTE, FL 33948 US

**FEI Number:** 65-0235009

**Certificate of Status Desired:** No

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

BALLARD, THOMAS  
2646 PEBBLE AVE.  
NORTH PORT, FL 34286 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 TRUSTEE  
Name BALLARD, THOMAS  
Address 2646 PEBBLE AVE  
City-State-Zip: NORTH PORT FL 34286

Title CO-TRUSTEE  
Name COSTA, ALBERT S  
Address 2499 CARNATION COURT  
City-State-Zip: NORTH PORT FL 34289

Title CHAIRPERSON  
Name HANSEN, CAROL  
Address 18410 DIGGERS AVE.  
City-State-Zip: PORT CHARLOTTE FL 33948

*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:** CAROL HANSEN

**CHAIRPERSON**

**01/18/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date