2002 UNIFORM BUSINESS REPORT (UBR)

Mar 18, 2002 8:00 am **DOCUMENT # 705721** Secretary of State 1. Entity Name 03-18-2002 90090 012 ****61.25 EVANGELICAL COVENANT CHURCH OF ROYAL PALM BEACH, INC. Principal Place of Business Mailing Address 660 ROYAL PALM BEACH BLVD. 660 ROYAL PALM BEACH BLVD. ROYAL PALM BEACH FL 33411 ROYAL PALM BEACH FL 33411 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1563158 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **BUSH, DONALD** 11682 49TH ST N ROYAL PALM BEACH FL 33411 City 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. SIGNATURE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. VDSD (9/01) TITLE ☐ Delete TITLE Change ☐ Addition NAME RICHARDSON, DEBORAH D NAME CR2E037 STREET ADDRESS 103 SWAN PARKWAY WEST STREET ADDRESS CITY-ST-ZIP **ROYAL PALM BEACH FL 33411** CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition RICHARDSON, JAMES M NAME NAME STREET ADDRESS 103 SWAN PARKWAY WEST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ROYAL PALM BEACH FL TITLE PD ☐ Delete TITLE ☐ Change Addition **BUSH, DONALD** NAME NAME STREET ADDRESS 11682 49TH ST N STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ROYAL PALM BEACH FL 33411 ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

an address, with all other like empowered

changed, or on an attachment v

SIGNATURE:

FILED

3-4-2002 561-793-