## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: <

## **FILED DOCUMENT # 707363** Apr 07, 2000 8:00 am Secretary of State ST ALFRED'S CHURCH, INC. 04-07-2000 90073 036 \*\*\*\*61.25 Principal Place of Business Mailing Address 1601 CURLEW RD. 1601 CURLEW RD. **PALM HARBOR FL 34683-6515** PALM HARBOR FL 34683 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-1146812 Not Applicable Country \$8.75 Additional Zip Country П 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Park O. Box Number is Not Acceptable). VAUGHN, EDWARD 2825 VALENCIA LN WEST tarbor PALM HARBOR FL 34684 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Pavable to FILE NOW: \$5.00 May Be Trust Funo Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. M Addition PD Delete TITLE Broward, Montgomery COX, CYNTHIA NAME 851 Hillside DR. STREET ADDRESS STREET ADDRESS PO BOX 491 CITY-ST-ZIP Harbon CITY-ST-ZIP OZONA FL 34660-0491 Palm ☐ Change ☐ Addition VD ☐ Delete TITLE TITI F NAME STAHLHUT, RONALD NAME STREET ADDRESS STREET ADDRESS 1207 OVERCASH DR CITY-ST-ZIP CITY-ST-ZIP DUNEDIN FL 34698-4802 Addition TITLE ☐ Change Delete TITLE Ollen, William 1513 Pleasant BRENCHLEY, CHARLES NAME Grove Dr. STREET ADDRESS STREET ADDRESS 593 N. BAYSHORE DRIVE CITY-ST-ZIP CITY-ST-ZIP Dunedy 34698-2341 SAFETY HARBOR FL 34695 De'ete TITLE Change Addition rk, Richa-d VAUGHN, EDWARD NAME Vista Blud. 1898 Lago STREET ADDRESS STREET ADDRESS 2825 VALENCIA LANE W. CITY-ST-7IP FL 34685-3350 CITY-ST-7IP PALM HARBOR FL 34684 ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this time 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 additional statutes.

Park 4/3/00 (727) 785-160