

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2000 8:00 am
Secretary of State

05-12-2000 90073 023 ****61.25

DOCUMENT # 709376

1. Entity Name

THE UNITED CHURCH OF CHRIST (CONGREGATIONAL), IN

Principal Place of Business

Mailing Address

1824 SOUTH HARBOR CITY BLVD.
 P.O. BOX 1513
 MELBOURNE FL 32901

1824 SOUTH HARBOR CITY BLVD.
 P.O. BOX 1513
 MELBOURNE FLA 32901-4746



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

1980 PALM BAY Rd

Box 62016

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Palm Bay FL

Palm Bay FL

City & State

City & State

4. FEI Number

59-1979167

Applied For

Not Applicable

Zip

32906

Country

Zip

32906-2016

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EISENMENGER, MARGARET
 319 MEADOW WOOD LN
 WEST MELBOURNE FL 32904

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T Delete
 NAME STREBLOW, STEVEN
 STREET ADDRESS 697 DINNER ST., N.E.
 CITY-ST-ZIP PALM BAY FL 32907

Treas Change Addition
 NAME KENT D. BRADLEY
 STREET ADDRESS 390 Lake View Dr
 CITY-ST-ZIP Melbourne Beach FL 32951-3229

TC Delete
 NAME EISENMENGER, MARGARET
 STREET ADDRESS 319 MEADOW WOOD LANE
 CITY-ST-ZIP W. MELBOURNE FL 32907

Change Addition

TS Delete
 NAME KIMBALL, ROGERS R JR.
 STREET ADDRESS 89 BOSSIEUX BLVD.
 CITY-ST-ZIP W. MELBOURNE FL 32907

T5 Change Addition
 NAME KATHLEEN HULLORD
 STREET ADDRESS 1041 SUNSWEEP Rd. N.E.
 CITY-ST-ZIP Palm Bay FL 32905

Delete

~~Trustee~~ Change Addition
 NAME Phyllis Rhinehart
 STREET ADDRESS 2346 White Sands Ct
 CITY-ST-ZIP Palm Bay FL 32907

Delete

Change Addition

Delete

Change Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael J. [Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/00

Date

321-953-2233

Daytime Phone #

CR2E037 (9/99)