

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 15, 2000 8:00 am**  
**Secretary of State**

02-15-2000 90043 006 \*\*\*\*70.00

00021745

DO NOT WRITE IN THIS SPACE

**DOCUMENT #** 709687

**1. Entity Name**  
 Redlands Christian Migrant Association, Inc.

<b>Principal Place of Business</b> 402 W. Main Street Immokalee, FL 34142-3933 US	<b>Mailing Address</b> 402 W. Main Street Immokalee, FL 34142-3933 US
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<b>2. Principal Place of Business</b>	<b>3. Mailing Address</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

<b>City &amp; State</b>	<b>City &amp; State</b>	<b>4. FEI Number</b> 59-1221966	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>Zip</b>	<b>Country</b>	<b>Zip</b>	<b>Country</b>
<b>6. Name and Address of Current Registered Agent</b>		<b>7. Name and Address of New Registered Agent</b>	

**Mainster, Barbara**  
 402 W. Main Street  
 Immokalee, FL 34142-3933

<b>Name</b>	
<b>Street Address (P.O. Box Number is Not Acceptable)</b>	
<b>City</b>	<b>FL</b> <b>Zip Code</b>

**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** \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ **DATE** \_\_\_\_\_

**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	
<b>TITLE</b> PD	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b> Sorn, George F.		<b>NAME</b>	
<b>STREET ADDRESS</b> 4530 Fontana Street		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b> Orlando, FL		<b>CITY-ST-ZIP</b>	
<b>TITLE</b> VD	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b> Cissel, Dorothy		<b>NAME</b>	
<b>STREET ADDRESS</b> 5842 S.W. 144 Circle Place		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b> Miami, FL		<b>CITY-ST-ZIP</b>	
<b>TITLE</b> VD	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b> Dinkel, John		<b>NAME</b>	
<b>STREET ADDRESS</b> P.O. Box 1531		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b> Tampa, FL		<b>CITY-ST-ZIP</b>	
<b>TITLE</b> TD	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b> Galvan, Eduardo		<b>NAME</b>	
<b>STREET ADDRESS</b> P.O. Box 1032		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b> Immokalee, FL		<b>CITY-ST-ZIP</b>	
<b>TITLE</b> D	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b> Mainster, Barbara		<b>NAME</b>	
<b>STREET ADDRESS</b> 402 W. Main Street		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b> Immokalee, FL		<b>CITY-ST-ZIP</b>	
<b>TITLE</b> SD	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b> Shapiro, Myra		<b>NAME</b>	
<b>STREET ADDRESS</b> 4301 Gulfshore Blvd.N., #401		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b> Naples, FL		<b>CITY-ST-ZIP</b>	

**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:** \_\_\_\_\_ **2-9-00 (407) 277-2951**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)

Attachment  
0# 709687  
DW21745

**AGENCY: Redlands Christian Migrant Association**

Name/Title	Occupation/ Employer	Mailing Address, Zip Phone Number	Total Years on Board	Current Term Expires
George Sorn	Retired CEO	4530 Fontana Street Orlando, FL 32807 407/277-2951	31	11/00
Dorothy Cissel	Retired Educator, Dade County	5842 SW 144 Circle Place Miami, FL 33183 305/385-1602	31	11/00
John Dinkel	Attorney McFarlane & Ferguson	P. O. Box 1531 Tampa, FL 33601 813/273-4308	14	11/00
Patrick Leary	Grower	Green Line, Inc. 935 52 <sup>nd</sup> Avenue Vero Beach, FL 32966 407/571-1845	6	11/00
Fred Thomas	Ex. Director Collier Co. Housing	1800 Farmworker Way Immokalee, FL 34142 941/657-3649	8	11/00
Myra Shapiro	Retired Educator	4301 Gulfshore Blvd., #401 Naples, FL 33940 941/263-2544	12	11/00
Eduardo Galvan	Crewchief Compliance Officer	P. O. Box 1032 Immokalee, FL 34142 941/658-3652	10	11/00
Fernando Espinosa	Parent Rep.	c/o RCMA Dover MHS 3238 San Jose Mission Drive Dover, FL 33527	New	11/00
Eduardo Reyes	Parent Rep.	c/o RCMA Plant City MHS 1402 W. Knights Griffin Road Plant City, FL 33566	New	11/00
Nelly Orozco	Parent Rep.	C/o RCMA Zellwood CDC P. O. Box 728 Zellwood, FL 32798	New	11/00
Ron Melancon	Ex. Director Health Res. Alliance	13520 17 <sup>th</sup> Street Dade City, FL 33526 352/567-0111	5	11/00
Miguel De La Cruz	Clergyman	441 Windermere Drive Lakeland, FL 33809 941/859-7296	4	11/00

Attachment  
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Richard Pringle	Attorney Strayhorn & Strayhorn	P. O. Box 128 Ft. Myers, FL 33905 941/334-1269	3	11/00
Diana Montanez	WIC Program Manatee Co.	410 6 <sup>th</sup> Avenue, East Bradenton, FL 34202 941/748-0747	3	11/00
Fernando Pro	Retired Administrator Dade County Schools	20310 SW 106 <sup>th</sup> Avenue Miami, FL 33189 305/238-0837	31	11/00
Weeda Mae Williams	Parent Rep.	1344 SW Harlem Circle Arcadia, FL 33821 941/494-0315	5	11/00
Medora Alleman	Grower Dade Co.	P. O. Box 900596 Homestead, FL 33033 305/235-3520	3	11/00
Gloria Williams	Parent Rep.	P. O. Box 502 Crescent City, FL 32112	2	11/00
Lauretta Stephens	Administrator Florida Non- Profit Housing	P. O. Box 1987 Sebring, FL 33871 941/385-2519	1	11/00
Aurelia Trejo	Parent Rep.	P. O. Box 248 Dover, FL 33527	1	11/00
Martha Raya	Parent Rep.	16 Anco Pit Road Haines City, FL 33844	1	11/00
Jeannee Elswick- Morrison	Administrator, Children & Families	Route 4, Box 296B Quincy, FL 32351 850/487-4386	1	11/00
Jack Norris	Grower	P. O. Box 1276 Palm City, FL 34991	1	11/00
Clem Miller	Administrator Children's Board of Hillsborough County	506 Mahogany Drive Seffner, FL 33584 813/229-2884	1	11/00
Lorena Islas	Parent Rep.	P. O. Box 2024 Gibsonton, FL 33435	1	11/00
Paula Melendez	Parent Rep.	3750 Tanner Road Dover, FL 33527	2	11/00
April Bryant	Parent Rep.	347 River Chase Circle Wauchula, FL 33873	New	11/00
Tangela Guerrero	Parent Rep.	P. O. Box 55 Bowling Green, FL 33834	New	11/00
Jaclyn Armstrong	Parent Rep.	P. O. Box 1183 Zolfo Springs, FL 33890	New	11/00

2/10/00