

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 710831**

1. Entity Name

SAINT MARK EVANGELICAL LUTHERAN CHURCH, DUNEDIN,**DUNEDIN**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 APR 26 AM 8:33

0000000000



DO NOT WRITE IN THIS SPACE

Principal Place of Business

1120 CURLEW ROAD
DUNEDIN FL 34698

Mailing Address

1120 CURLEW ROAD
DUNEDIN FL 34698
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1259459

Applied For

Not Applicable

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

KERN, EUGENE H PASTOR
200 WATERVIEW COURT
SAFETY HARBOR FL 34695

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 \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WOODARD, DEBORAH 3429 ASPEN TR CLEARWATER FL 33761	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SCHAEFFER, MATT 137 GARLAND CIR PALM HARBOR FL 34683	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WOODWORTH, BARBARA 2183 KARAN WAY CLEARWATER FL 33763	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD NIZER, RAYMOND 1343 SADDLE COURT PALM HARBOR FL 34683	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KERN, EUGENE H PASTOR 200 WATER VIEW COURT SAFETY HARBOR FL 34695	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SWARTZ, WILLIAM 700 MONTENEY AVE CLEARWATER FL 33759	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Barbara Wolf 1241 Cordoba Court Palm Harbor FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Dale Woodworth 2183 KARAN Way Clearwater FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Karen Bacher 30 Beechtree Court Palm Harbor FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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 empowers.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/01

727-
733-0974

Date

Daytime Phone

CR2037 (10/00)