2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2002 8:00 am
Secretary of State
02-14-2002 90072 038 ****61.25

DOCUMENT # 713184

1. Entity Name

THE EVANGELICAL COVENANT CHURCH OF TRAILER ESTAT ES, INC.

Principal Place of Business	Mailing Address
6828 CANADA ES. INC. ATES. INC. <THE) BRADENTON FL 34281-6150 US	P.O. BOX 6150 ES. INC. ATES. INC. <THE) BRADENTON FL 34281-6150 US

DO NOT WRITE IN THIS SPACE

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 59-2348762 ☐ 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
ELOWSON, DAVID A. 3400 AVENIDA MADERA BRADENTON FL 34210	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	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ELOWSON, DAVID 3400 AVENIDA MADERA BRADENTON, FL.	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MAC FARLANE, HERBERT 6606 WASHINGTON ST. BRADENTON FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MUMFORD, WILLIAM 1709 IOWA BRADENTON FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD POOR ROBERT (POOR) 1818 MINNESOTA BRADENTON FL ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BULL, LORRAINE 2115 MINNESOTA BRADENTON FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MUMFORD, MARY JANE 1709 IOWA BRADENTON FL ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HACK, ELLEN 1710 MINNESOTA BRADENTON FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MILLER, LORRETTA 1610 INDIANA BRADENTON FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

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: Herbert Farlane H MAC FARLANE JAN 28/02 941-756-7722
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #