2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2000 8:00 am
Secretary of State
02-28-2000 90191 007 ****61.25

DOCUMENT # 716434

1. Entity Name

WESTMINSTER PRESBYTERIAN CHURCH UNITED OF GAINES

Principal Place of Business	Mailing Address
1521 N.W. 34TH ST. GAINESVILLE FL 32605	1521 N.W. 34TH ST. GAINESVILLE FL 32605-5033

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 59-6215886 ☐ 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
SINGLEY, DR. ED 1719 N W 23RD BLVD PH-E GAINESVILLE, FLORIDA 32605	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 _____ J.E. SINGLEY 2/14/00
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	DP GRIFFIN, NANCY A P O BOX 14190 GAINESVILLE FL 32604-2190	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV GREGORY, JESS 3838 SW 5TH PL GAINESVILLE FL 32607	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SINGLEY, VIRGINIA H 1719 NW 23 BLVD PH-E GAINESVILLE FL 32605	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GAYLE, NORMA 6005 SW 86 DR. GAINESVILLE FL 32608	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KENNEDY, AMY 10107 SW 13 PL GAINESVILLE FL 32607	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	## Change ☐ Addition DS ELLEN HUNTLEY 113 NE 7 street Gainesville 32601
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS ZALATORIS, ALICE 3914 SW 26 DR., APT B GAINESVILLE FL 32608	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	## Change ☐ Addition D TERRY TREMWEL 3850 NW 36 PLACE GAINESVILLE 32606-6146

CR2E037 (9/99)

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: _____ RE Nancy A. Griffin 2/13/00 (352)395-5057
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #