

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 04, 2002 8:00 am
Secretary of State

03-04-2002 90011 007 ****61.25

DOCUMENT # 723524

1. Entity Name

FIRST CHRISTIAN CHURCH OF DUNNELLON, FLORIDA, IN C.

Principal Place of Business

Mailing Address

12401 SW RD #484
 DUNNELLON FL 34432
 US

12401 SW RD #484
 DUNNELLON FL 34432
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-4210052

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

YANDELL, DONALD
6261 SW 102ND ST RD
OCALA FL 34476

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: Delete
 NAME: **PCD BAYS, ROBERT**
 STREET ADDRESS: **7716 SW 117TH ST RD**
 CITY-ST-ZIP: **OCALA FL 34476**

TITLE: Change Addition
 NAME: **VD COLLINS, ELMER**
 STREET ADDRESS: **10947 SW 53RD CIRCLE**
 CITY-ST-ZIP: **OCALA, FL 34476**

TITLE: Delete
 NAME: **VD STRANGE, MURRAY**
 STREET ADDRESS: **7918 CR 109-5**
 CITY-ST-ZIP: **LADY LAKE FL 32159**

TITLE: Change Addition
 NAME: **D DEMS, WILLIAM**
 STREET ADDRESS: **8331 SW 135TH LOOP**
 CITY-ST-ZIP: **OCALA, FL 34473**

TITLE: Delete
 NAME: **D GRAHAM, DAVID**
 STREET ADDRESS: **10 PINE WAY PLACE**
 CITY-ST-ZIP: **OCALA FL 34472**

TITLE: Change Addition
 NAME: **TSD YANDELL, DONALD**
 STREET ADDRESS: **6221 SW 102ND ST RD**
 CITY-ST-ZIP: **OCALA FL 34476**

TITLE: Delete
 NAME: **D BADGEROW, MARVIN**
 STREET ADDRESS: **8863-B SW 92ND STREET**
 CITY-ST-ZIP: **OCALA FL 34481**

TITLE: Change Addition
 NAME: **D COLLINS, ELMER**
 STREET ADDRESS: **11285 SW 75TH TERR**
 CITY-ST-ZIP: **OCALA FL 34476**

TITLE: Delete
 NAME: **D COLLINS, ELMER**
 STREET ADDRESS: **11285 SW 75TH TERR**
 CITY-ST-ZIP: **OCALA FL 34476**

TITLE: Change Addition

TITLE: Delete
 NAME: **D COLLINS, ELMER**
 STREET ADDRESS: **11285 SW 75TH TERR**
 CITY-ST-ZIP: **OCALA FL 34476**

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: **DONALD YANDELL**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **2/20/02** Daytime Phone #: **952-861-0598**

CR2E037 (9/01)