

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 30, 2001 8:00 am
Secretary of State

03-05-2001 90310 036 ****70.00

DOCUMENT # 748724
 1. Entity Name
LIBERTY TEMPLE CHRISTIAN CENTER, INC.

Principal Place of Business 8642 STARKEY ROAD LARGO FL 33777 US	Mailing Address 8642 STARKEY ROAD LARGO FL 33777 US.
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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 59-2447271	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
LONGTIN, DAN
7298 ULMERTON RD #609
LARGO FL 34641

7. Name and Address of New Registered Agent
 Name: **Mike Pino**
 Street Address (P.O. Box Number is Not Acceptable):
1953 Overcash Dr.
Dunedin, FL
 City: **FL** Zip Code: **34698**

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: *Michael V. Puro* (NOTE: Registered Agent signature required when reinstating). DATE: **3/19/01**

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

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		<input type="checkbox"/> Delete
TITLE	D	<input type="checkbox"/> Delete
NAME	ELRITH, PAUL	
STREET ADDRESS	1160 WOODBROOK DR	
CITY-ST-ZIP	LARGO FL	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	LONGTIN, DAN	
STREET ADDRESS	7298 UIMERTON RD #609	
CITY-ST-ZIP	CARGO FL 34641	
TITLE	D	<input type="checkbox"/> Delete
NAME	ELRITH, PAULSON	
STREET ADDRESS	1001 STARKLEY RD #811	
CITY-ST-ZIP	LARGO FL	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	PAMOLES, ROMAN	
STREET ADDRESS	160 WOOD BROOK DR	
CITY-ST-ZIP	LARGO FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SCHULER, PAUL	
STREET ADDRESS	8945 COUNTY SQ DR.	
CITY-ST-ZIP	CARGO FL 34647	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
TITLE	Mike Pino PD	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	1453 Overcash Dr		
STREET ADDRESS	Dunedin FL, 34698		
CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Washburn, Billie		
STREET ADDRESS	8942 Enhancement Dr.		
CITY-ST-ZIP	Largo, Florida 33773		
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

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: *Michael V. Puro* Date: **2/21/01**
Michael V. Puro Date: **02/06/01**

CR2E037 (5/00)