## **2000 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment with an address, with all oth

SIGNATURE:

## **FILED** DOCUMENT # 752197 May 15, 2000 8:00 am Secretary of State TAMPA BAY PRESBYTERIAN CHURCH OF TAMPA, INC. 05-15-2000 90287 012 \*\*\*\*61.25 Principal Place of Business 19911 BRUCE B. DOWINS BLVD. 19911 BRUCE B. OOWINS BLVD. **TAMPA FL 33647** TAMPA FL 33647-2474 Marte 2. Principal Place of Business 3. Mailing Address 9911 BRUCE B. DOWNS BLVd DOWNS Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2001613 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) OWENS, JEAN 13003 WATERFORD RUN DRIVE RIVERVIEW FL 33569 City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Delete TITLE ☐ Change ☐ Addition TITLE NAME POWELL, CLIFF NAME STREET ADDRESS STREET ADDRESS 938 RIVERHILLS DR CITY-ST-ZIP CITY-ST-ZIP TEMPLE-TERRAGE-FL-33617-☐ Delete TITI F Change Change ☐ Addition TITLE NAME PORTER, THOMAS A. NAME STREET ADDRESS STREET ADDRESS 9012 HOGAN'S BEND CITY-ST-ZIP CITY-ST-ZIP TAMPA FL ☐ Delete TITLE ☐ Change ☐ Addition SD TITLE NAME POTHOVEN, KENNETH NAME STREET ADDRESS STREET ADDRESS 1403 WATERWOOD DR CITY-ST-ZIP CITY-ST-7IP LUTZ FL 33549 Change ☐ Addition ☐ Delete TITLE TITLE HUNTER, RICHARD NAME NAME STREET ADDRESS STREET ADDRESS 28432 TALL GRASS DRIVE CITY-ST-7IP CITY-ST-ZIP WESLEY CHAPEL FL 33543 ☐ Change Addition ☐ Delete TITLE LANG, KEVIN NAME NAME STREET ADDRESS STREET ADDRESS 9420 LARKBUNTING Drive CITY-ST-ZIP CITY-ST-ZIP TAMPA, FL 33647 Change ☐ Addition TITI F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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