

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 30, 2002 8:00 am
Secretary of State

04-04-2002 90088 025 ****61.25

DOCUMENT # 755923

1. Entity Name

POINCIANA CHRISTIAN CHURCH, INC.

Principal Place of Business

Mailing Address

4900 PLEASANT HILL RD.
 KISSIMMEE FL 34759

4900 PLEASANT HILL RD.
 KISSIMMEE FL 34759

2. Principal Place of Business

3. Mailing Address

Suits, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2253302

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

NOLL, GEORGE D
1748 WESTERN REDWOOD AVE
KISSIMMEE FL 34758

7. Name and Address of New Registered Agent

Name

Marilyn Attebery

Street Address (P.O. Box Not Acceptable)

3181 Pleasant Hill Rd

City

Kissimmee

FL

Zip Code **34746**

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

Marilyn Attebery

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
ECBD	TARANGER, NILS	2335 PINE TREE COURT	KISSIMMEE FL	<input type="checkbox"/>
TD	STEVE PETROULAKIS	738 YUCATAN CT	KISSIMMEE FL 34758	<input type="checkbox"/>
EDVC	HOGAN, ED	3000 PINERIDGE CIRCLE	KISSIMMEE FL	<input type="checkbox"/>
DD	COPP, ROBERT	807 NELSON DRIVE	KISSIMMEE FL	<input type="checkbox"/>
ED	NOLL, GEORGE D.	1748 WESTERN REDWOOD AVE	KISSIMMEE FL	<input checked="" type="checkbox"/>
DSD	JIM SULLIVAN	1734 CONIFER AVENUE	KISSIMMEE FL 34758	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 other like empowered.

SIGNATURE:

Stephan A. Petroulakos Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/02 407-659-5241

Date

Daytime Phone #

CR2037 (9/01)