2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2000 8:00 am
Secretary of State
03-24-2000 90088 045 ****61.25

DOCUMENT # 757561

1. Entity Name

CAPE CORAL ALLIANCE CHURCH OF THE CHRISTIAN AND

Principal Place of Business	Mailing Address
4307 SKYLINE BLVD CAPE CORAL FL 33914-7539 US	4307 SKYLINE BLVD CAPE CORAL FL 33914-7539 US

629506

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 59-2392467 ☐ 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
OLONOVICH, EDWARD 1805 SE 1ST TERRACE CAPE CORAL FL 33990	Name WALTER D. ATKINS Street Address (P.O. Box Number is Not Acceptable) 5731 SW 9TH COURT City CAPE CORAL FL Zip Code 33914

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 Walter D. Atkins Treasurer WALTER D. ATKINS 3/20/2000
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	TD OLONOVICH, EDWARD 1805 SE 1ST TERRACE CAPE CORAL FL 33990	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D OLONOVICH, EDWARD 1805 SE. 1ST TERRACE CAPE CORAL FL 33990	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ATKINS, W D 5731 SW 9TH COURT CAPE CORAL FL 33914	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ATKINS, WALTER D 5731 SW 9TH COURT CAPE CORAL FL 33914	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TRD IHRIG, HARVEY 1008 SW 54TH LN CAPE CORAL FL 33914	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D IHRIG, HARVEY 1008 SW 54TH LN CAPE CORAL FL 33914	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WHITNEY, NORMA 2118 SW 11TH CT CAPE CORAL FL 33991	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHELTON, JANET 1429 SE 30TH TERRACE CAPE CORAL FL 33904	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, FREDERICK 4507 SW 7 AVE CAPE CORAL FL 33914	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ALVEY, WILLIAM 1328 SW 26TH ST CAPE CORAL FL 33914	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD SUND, GREGORY P 413 SE 19TH LANE CAPE CORAL FL 33990	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EREMENTO, LEONARD 2528 SW 30TH TER CAPE CORAL, FL 33914	☐ Change ☒ Addition

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: Edward Olonovich EDWARD OLONOVICH 3-8-2000 941-542-7844
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #