

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 771118

1. Entity Name

THE FOUNDATION FOR THE CHURCH OF THE PALMS - PRE
SBYTERIAN (U.S.A.), INC.

Principal Place of Business

3224 BEE RIDGE ROAD
SARASOTA FL 34233
US

Mailing Address

3224 BEE RIDGE ROAD
SARASOTA FL 34233
US

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 59-2434393

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

SAVARY, JOHNSON S.
240 SO PINEAPPLE AVE
SARASOTA FL 34236

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 NAME	P DUDASH, DONNA	☐ Delete
STREET ADDRESS	5672 ST LOUIS AVE.	
CITY-ST-ZIP	SARASOTA FL 34233	
TITLE NAME	DT VANDERZEE, ROBERT	☐ Delete
STREET ADDRESS	7913 BROADMOOR PINES BLVD	
CITY-ST-ZIP	SARASOTA FL	
TITLE NAME	DS GOODWILL, JAY	☐ Delete
STREET ADDRESS	1768 OAK LAKES DRIVE	
CITY-ST-ZIP	SARASOTA FL	
TITLE NAME	D WEST, ANNETTE W	☐ Delete
STREET ADDRESS	4216 BENT TREE BLVD	
CITY-ST-ZIP	SARASOTA FL 34241	
TITLE NAME	D MILLS, DAVID	☐ Delete
STREET ADDRESS	3328 ESPANOLA DR	
CITY-ST-ZIP	SARASOTA FL 34239	
TITLE NAME	D SANDHAGEN, RAY L	☐ Delete
STREET ADDRESS	7741 RED CEDAR LANE	
CITY-ST-ZIP	SARASOTA FL 34241	

TITLE NAME	D SKIPPER, J. RONALD	☐ Change ☒ Addition
STREET ADDRESS	3415 WEST FOREST LAKES CIRCLE	
CITY-ST-ZIP	SARASOTA, FLORIDA 34232	
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Feb 10, 2002 8:00 am
Secretary of State

02-10-2002 90023 014 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)