

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2001 08:00 AM
Secretary of State

DOCUMENT # 812778

1. Entity Name
 MORAVIAN CHURCH IN AMERICA, SOUTHERN PROVINCE

Principal Place of Business 459 S. CHURCH ST. WINSTON-SALEM NC	Mailing Address P. O. DRAWER M WINSTON-SALEM NC 27108
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2. Principal Place of Business Suite, Apt. #, etc. City & State	3. Mailing Address Suite, Apt. #, etc. City & State
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4. FEI Number
56-0552778

Applied For	<input type="checkbox"/>
Not Applicable	<input type="checkbox"/>

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MOISINGER JOHN JR.ESQ.
 201 N. PALMETTO AVE.

ORLANDO FL
 32801 US

7. Name and Address of New Registered Agent

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 _____ DATE **04/03/2001**
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	D JOHNSON GEORGE E 3666 CLINEZDALE AVE PFAFFTOWN NC 27040	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHELTON THOMAS G 2086 FRIEDBERG RD WINSTON-SALEM NC 27127	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SAWYER ROBERT E 459 S. CHURCH STREET WINSTON-SALEM NC	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CARTNER RICHARD H. 459 S. CHURCH ST. WINTSTON-SALEM NC	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAPP LANE A 600 HOLLY AVENUE WINSTON-SALEM NC	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOMBICK BETEY R 817 GALES AVE WINSTON-SALEM NC 27103	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOMBICK BETSEY R 817 GALES AVE WINSTON-SALEM NC 27103	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Richard H. Cartner ST 04/03/2001

CR2E037 (11/00)