## 2002 UNIFORM BUSINESS REPORT (UBR)

## Mar 25, 2002 8:00 am DOCUMENT # N0000005347 **Secretary of State** 03-25-2002 90025 039 \*\*\*\*61.25 CALVARY CHAPEL OF VENICE, INC. Principal Place of Business Mailing Address 4856 ELIZABETH AVENUE 4856 ELIZABETH AVENUE B0048662 SARASOTA FL.34233 SARASOTA FL 34233 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For 65-1050979 Not Applicable Zip Ζίρ Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -Name =-Street Address (P.O. Box Number is Not Acceptable) Wülfing, Barbara e 4856 ELIZABETH AVE SARASOTA FL 34233 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 WASTER TO AND Signature, typed or printed hame of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Addition (9/01 TITLE Delete TITLE ☐ Change Christian Thostenson 4023 Westminister Dr WULFING, WAYNE R NAME NAME STREET ADDRESS STREET ADDRESS 4856 ELIZABETH AVE CITY - ST- ZIP CITY-ST-ZIP SARASOTA FL 34233 Sarasota ☐ Change Delete TITLE TITLE Addition THOMSON, CHRISTOPHER E NAME NAME 930 PINTO CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NOKOMIS FL 34275 TITLE Deléte TITLE ☐ Change Addition WULFING. BARBARA E NAME NAME STREET ADDRESS 4856 ELIZABETH AVE STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34233 CITY-ST-ZIP ☐ Delete ☐ Change TITLE TITLE Addition DIXON, CARL NAME NAME 4614 HIDDEN VIEW PL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34235 ☐ Addition TITLE ☐ Delete SHEDLEBOWER, DARIN NAME STREET ADDRESS 3014 LINWOOD DR STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34232 CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete STOUP, ERIC NAME NAME 1107 16TH ST. WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34205** 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

3/11/02 (941) 922-4689

FILED