

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90229 027 ****61.25

DOCUMENT # N00000007274

1. Entity Name

INDIAN RIVER PRESBYTERIAN CHURCH PCA, INC.

Principal Place of Business

Mailing Address

7025 29TH CT
 VERO BEACH FL 32967

7025 29TH CT
 VERO BEACH FL 32967

00050374



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

4325 N. U.S. HIGHWAY 1

4325 N. US HIGHWAY 1

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

VERO BEACH, FL

City & State

VERO BEACH, FL.

4. FEI Number

65-1052218

Applied For

Not Applicable

Zip

32967

Country

USA

Zip

32967

Country

USA

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

**TAYLOR, JAMES A III
 5070 N HWY A-1-A, STE 200
 VERO BEACH FL 32963**

Name **BERNIE van EYK**

Street Address (P.O. Box Number is Not Acceptable)

4325 N. US Highway 1

City

VERO Beach

FL

Zip Code

32967

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]

Bernie van Eyk, President, Director 4-30-01

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 ☐ Delete
 NAME **D**
 STREET ADDRESS **VAN EYK, BERNIE**
 CITY-ST-ZIP **7025 29TH CT
 VERO BEACH FL 32967**

TITLE ☒ Change ☐ Addition
 NAME **P/D**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **DAVIS, JAMES W**
 CITY-ST-ZIP **7025 29TH CT
 VERO BEACH FL 32967**

TITLE ☒ Change ☐ Addition
 NAME **S/T/D**
 STREET ADDRESS **DAVIS, JAMES W.**
 CITY-ST-ZIP **3510 6TH PL. S.W.
 Vero Beach, FL. 32968**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **FROELICH, PETER**
 CITY-ST-ZIP **7025 29TH CT
 VERO BEACH FL 32967**

TITLE ☒ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **FROELICH, PETER**
 CITY-ST-ZIP **2976 59TH AVE
 VERO Beach, FL. 32966**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 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]* **SIGNATURE REQUIRED JAMES W. DAVIS 4-30-01 561-567-8000**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # **X245**

CR2E037 (10/00)