

FILED
Jun 22, 2001 8:00 am
Secretary of State

05-30-2001 90031 024 ****61.25

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01407

1. Entity Name

CITY CHURCH, INC.

Principal Place of Business

1335 NORTH SHORE DRIVE
LEESBURG FL 34748

Mailing Address

1335 NORTH SHORE DRIVE
LEESBURG FL 34748

2. Principal Place of Business

1335 Marshall Dr.

Suite, Apt. #, etc.

3. Mailing Address

1335 Marshall Dr

Suite, Apt. #, etc.

City & State

Leesburg FL

City & State

Leesburg FL

Zip

34748

Country

USA

Zip

34748

Country

USA

4. FEI Number

59-2394807

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

TAYLOR, L.E.
1029 WEST MAGNOLIA ST.
LEESBURG FL 34748

7. Name and Address of New Registered Agent

Name

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

1361 Peters Dr.

City

Leesburg

FL

Zip Code

34748

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

Kelly P. Brinkley

Kelly Brinkley

6/20/01

(Signature, typed or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	BRINKLEY, CHRIS L	
STREET ADDRESS	1361 PETERS DRIVE	
CITY-ST-ZIP	LEESBURG FL 34748	
TITLE	TD	☐ Delete
NAME	HARROD, DUDLEY	
STREET ADDRESS	2418 VIRGINIA DRIVE	
CITY-ST-ZIP	LEESBURG FL 34748	
TITLE	SD	☐ Delete
NAME	SIWEK, STANLEY	
STREET ADDRESS	4305 EMMALS ROAD	
CITY-ST-ZIP	FRUITLAND PARK FL 34731	
TITLE	VD	☒ Delete
NAME	BARINKLEY, JAMES L	
STREET ADDRESS	1310 MAY COURT	
CITY-ST-ZIP	LEESBURG FL 34748	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

Chris L. Brinkley

Date

5/25/01

Daytime Phone #

352-787-6833

CR2E037 (10/00)