

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 24, 2003 8:00 am**  
**Secretary of State**

01-24-2003 90046 035 \*\*\*\*\*61.25

**DOCUMENT # N24110**

1. Entity Name

**UNIVERSITY PARKWAY CHRISTIAN CHURCH, INC.**



Principal Place of Business

**6960 PROSPECT ROAD  
SARASOTA FL 34243**

Mailing Address

**6960 PROSPECT ROAD  
SARASOTA FL 34243**

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 **65-0021958**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HUGHES, DONALD  
7329 ALDERWOOD DRIVE  
SARASOTA FL 34242**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Donald L. Hughes*  
Signature, typed or printed name of registered agent and date if applicable

*Elder*  
(NOTE: Registered Agent signature required when reinstating)

DATE

**1-19-03**

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete  
NAME **HUGHES, DONALD**  
STREET ADDRESS **7329 ALDERWOOD DRIVE**  
CITY-ST-ZIP **SARASOTA FL**

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

TITLE **T** ☐ Delete  
NAME **KNOPE, FLORENCE**  
STREET ADDRESS **7203 24TH AVE., W**  
CITY-ST-ZIP **BRADENTON FL**

TITLE ☐ Change ☐ Addition  
NAME **6523 JARVIS ROAD**  
STREET ADDRESS **SARASOTA, FL 34241**  
CITY-ST-ZIP

TITLE **D** ☒ Delete  
NAME **CARSON, DON**  
STREET ADDRESS **5721 GARDEN LAKES PALM**  
CITY-ST-ZIP **BRADENTON FL**

TITLE ☐ Change ☒ Addition  
NAME **JOHNSON, BILL**  
STREET ADDRESS **4040 42nd ST.**  
CITY-ST-ZIP **SARASOTA FL 34235**

TITLE **D** ☐ Delete  
NAME **YATES, EDWARD**  
STREET ADDRESS **2876 INDIANTOWN DRIVE**  
CITY-ST-ZIP **SARASOTA FL 34232**

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

TITLE **CD** ☐ Delete  
NAME **MCLAUGHLIN, KEN**  
STREET ADDRESS **3408 YORK DRIVE W**  
CITY-ST-ZIP **BRADENTON FL 34205**

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:

*Kenneth E. McLaughlin*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1-19-03**

**941**

**753-1584**

Date

Daytime Phone #

CR2E037 (10/02)