

2000 UNIFORM BUSINESS REPORT (UBR)

71

DOCUMENT # N30382

1. Entity Name

PONTE VEDRA PRESBYTERIAN CHURCH, INC.

R/R

FILED
Aug 17, 2000 8:00 am
Secretary of State

07-19-2000 90012 015 ****61.25

Principal Place of Business

4510 PALM VALLEY RD
PONTE VEDRA BEACH FL 32082
US

Mailing Address

P.O. BOX 1734
PONTE VEDRA BEACH FL 32004
US

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

59-2926349

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~SCOTT, ALAN B.~~
~~224 CHANTAL COURT~~
~~PONTE VEDRA BEACH FL 32082~~

7. Name and Address of New Registered Agent

Name Randal Fairbanks
Street Address (P.O. Box Number is Not Acceptable)
Walker Fairbanks
24 Mackeral St.
City Ponte Vedra Beach FL Zip Code 32082

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

Randal C. Fairbanks

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

(NOTE: Registered Agent signature required when reinstating)

DATE

7-17-00

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

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	DP	<input type="checkbox"/> Delete
NAME	SCOTT, ALAN B.	
STREET ADDRESS	224 CHANTAL COURT	
CITY-ST-ZIP	PONTE VEDRA BCH. FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	STEEN, KENT	
STREET ADDRESS	121 NORTH COVE DRIVE	
CITY-ST-ZIP	PONTE VEDRA BEACH FL	
TITLE	Y	<input type="checkbox"/> Delete
NAME	PATTERSON, CECIL JR	
STREET ADDRESS	85 S ROSCOE BLVD	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082	
TITLE	D	<input type="checkbox"/> Delete
NAME	HAMMACK, AL	
STREET ADDRESS	422 OSPREY POINT	
CITY-ST-ZIP	PONTE VEDRA BEACH FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	GOODMAN, JERRY	
STREET ADDRESS	130 GLEN COVE PL	
CITY-ST-ZIP	PONTE VEDRA BEACH FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Randal C. Fairbanks
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/12/00
Date

(904) 285-8225
Daytime Phone #

CR2E037 (5/00)