

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2002 8:00 am
Secretary of State

09-08-2002 90091 037 ****70.00

DOCUMENT # N31414

1. Entity Name

CHURCH OF CHRIST OF SARABAY, INC.

Principal Place of Business

Mailing Address

C/O LAYON F. ROBINSON, II
 442 OLD MAIN STREET
 BRADENTON FL 34205-7821

C/O LAYON F. ROBINSON, II
 442 OLD MAIN STREET
 BRADENTON FL 34205-7821

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

65-0226348

Applied For

Not Applicable

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

**ROBINSON, LAYON F. II
 442 OLD MAIN STREET
 BRADENTON FL 34205**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**After September 13, 2002,
 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
 NAME VAUGHN, STEPHEN
 STREET ADDRESS 4642 ORLANDO CIRCLE
 CITY-ST-ZIP BRADENTON FL

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

TITLE ☐ Delete
 NAME VD WASHINGTON, TOM
 STREET ADDRESS 3039 46TH AVE E
 CITY-ST-ZIP BRADENTON FL

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

TITLE ☐ Delete
 NAME D HALL, BARRY
 STREET ADDRESS 5415 8TH ST CT W #8
 CITY-ST-ZIP BRADENTON FL 34207

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

TITLE ☐ Delete
 NAME TD WOODIE, RAYMOND
 STREET ADDRESS 1008 31ST STREET EAST
 CITY-ST-ZIP PALMETTO FL

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

TITLE ☐ Delete
 NAME SD LEAKS, SHERRY
 STREET ADDRESS 1104 72ND STREET W
 CITY-ST-ZIP RUBONIA FL

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

TITLE ☐ Delete
 NAME D WOODIE, ROBERT
 STREET ADDRESS 2405 1ST AVE E
 CITY-ST-ZIP PALMETTO FL 34221

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: *Sherry Leaks* **Sherry Leaks** 9-1-02 941-729-2339

CR2E037 (4/02)