

FILED
May 28, 2002 8:00 am
Secretary of State

05-01-2002 91546 036 ***61.25

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N36402
1. Entity Name
KEY LARGO CHURCH OF CHRIST, INC.

Principal Place of Business 100695 N. OVERSEAS HWY. KEY LARGO FL 33037	Mailing Address 100695 N. OVERSEAS HWY. KEY LARGO FL 33037
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0174404		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent
**LEROY SHADE
57 HIBISCUS LANE
KEY LARGO FL 33037**

7. Name and Address of New Registered Agent
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.

SIGNATURE _____
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
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10. OFFICERS AND DIRECTORS

TITLE	D	☒ Delete
NAME	WILLIS, LINDA	
STREET ADDRESS	2027 SE 26TH LANE	
CITY-ST-ZIP	HOMESTEAD FL 33035	
TITLE	D	☐ Delete
NAME	SHADE, LEROY	
STREET ADDRESS	54 HIBISCUS LANE	
CITY-ST-ZIP	KEY LARGO FL	
TITLE	D	☐ Delete
NAME	JOHNSON, BEVERLY	
STREET ADDRESS	22 HIBISCUS LN	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	RICHARDSON, LEWIS	☐ Delete
NAME	35 ORANGE DR.	
STREET ADDRESS	KEY LARGO, FL 33037	
CITY-ST-ZIP		
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	D	☐ Change ☒ Addition
NAME	SHADE, LEROY	
STREET ADDRESS	54 HIBISCUS LANE	
CITY-ST-ZIP	KEY LARGO, FL 33037	
TITLE	D	☐ Change ☒ Addition
NAME	Richardson, Lewis	
STREET ADDRESS	35 Orange Dr.	
CITY-ST-ZIP	Key Largo, FL 33037	
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		

CR2E037 (9/01)

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 REQUIRED** *Leroy Shade* **4/11/02 305 451-0073**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #