

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

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91204 002 ****61.25

DOCUMENT # N93000003387

1. Entity Name
LAUREL WORSHIP CENTER, INC.



Principal Place of Business

**312 E LAUREL RD
LAUREL FL 34272
US**

Mailing Address

**P.O. BOX 235
LAUREL FL 34272
US**

2. Principal Place of Business

111 Tamiami Trl. North

3. Mailing Address

111 Tamiami Trl. North

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Nokomis, FL

City & State

Nokomis, FL

4. FEI Number **65-0437762**

Applied For

Not Applicable

Zip

34275

Country

USA

Zip

34275

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**YODER, RENEE B
3906 MEADOWCREEK DR
SARASOTA FL 34233**

7. Name and Address of New Registered Agent

Name **Dr. Richard R. Howett**

Street Address (P.O. Box Number is Not Acceptable)
730 Treasure Rd.

City **Venice**

FL

Zip Code
34293

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

Richard R. Howett

4-16-03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **BARRIBALL, PAUL**
STREET ADDRESS **1011 RIVER OAKS**
CITY-ST-ZIP **VENICE FL 34293**

TITLE **D** ☐ Delete
NAME **CARROTHERS, MARLENE**
STREET ADDRESS **507 S JESSICA ST**
CITY-ST-ZIP **NOKOMIS FL 34275**

TITLE **D** ☒ Delete
NAME **WEBER, HELMUTH**
STREET ADDRESS **254 LAUREL HOLLOW DR**
CITY-ST-ZIP **NOKOMIS FL 34275**

TITLE ☐ Delete
NAME
STREET ADDRESS
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 **Director** ☐ Change ☒ Addition
NAME **Mary Croom**
STREET ADDRESS **128 Second St.**
CITY-ST-ZIP **Nokomis, FL 34275**

TITLE **Director** ☐ Change ☒ Addition
NAME **John Kutzko**
STREET ADDRESS **109 Louella Lane**
CITY-ST-ZIP **Nokomis, FL 34275**

TITLE **Sec.-Treas.** ☐ Change ☒ Addition
NAME **Renee B. Yoder**
STREET ADDRESS **1437 Strada D'Oro**
CITY-ST-ZIP **Venice, FL 34292**

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 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:

Renee B. Yoder **RENEE B. YODER**

4-16-03

941-484-1343

CR2E037 (10/02)