

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000002367

FILED
May 04, 2000 8:00 am
Secretary of State

05-04-2000 90023 013 ****61.25

1. Entity Name

FELLOWSHIP ALLIANCE CHURCH, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

5735 69TH STREET E
 PALMETTO FL 34221
 US

5735 69TH ST.E
 PALMETTO FL 34221-9011
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0567371

Applied For

Not Applicable

Zip

Country

Zip

Country

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

THOMAS, ZACK
 5735 69TH STREET E
 PALMETTO FL 34221

Name *Rev. Clark Gardner*

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

5735 69th St. E.

Palmetto

City

FL

Zip Code
34221

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

V. Morscheck, Treas.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEES ARE \$61.25

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	P	<input checked="" type="checkbox"/> Delete
NAME	THOMAS, ZACK	
STREET ADDRESS	5735 69TH STREET E	
CITY-ST-ZIP	PALMETTO FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	AMSTUTZ, MAHLON	
STREET ADDRESS	1200 AURORA BLVD	
CITY-ST-ZIP	BRADENTON FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	DAVIS, PAMELA J	
STREET ADDRESS	6806 67TH ST CIR EAST	
CITY-ST-ZIP	PALMETTO FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	MORSCHECK, VONNIE	
STREET ADDRESS	1200 AURORA BLVD	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	SARCHET, DOUG	
STREET ADDRESS	1420 9TH AVE E	
CITY-ST-ZIP	PALMETTO FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	PIERCE, LELA	
STREET ADDRESS	1200 AURORA BLVD	
CITY-ST-ZIP	BRADENTON FL	

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<i>Rev. Clark Gardner</i>	
STREET ADDRESS	<i>5735 69th Street E.</i>	
CITY-ST-ZIP	<i>Palmetto, FL 34221</i>	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<i>1200 Aurora Blvd. 122B</i>	
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 checked="" type="checkbox"/> Addition
NAME	<i>1200 Aurora Blvd. 101A</i>	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<i>1200 Aurora Blvd. 103A</i>	
STREET ADDRESS		
CITY-ST-ZIP	<i>Bradenton, FL 34202</i>	

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 titles empowered.

SIGNATURE:

Clark Gardner
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr. 23, 2000
 Date

941-723-9593
 Daytime Phone #

CR2E037 (9/99)