2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 11, 2001 8:00 am
Secretary of State
01-11-2001 90037 009 ****70.00

DOCUMENT # N96000003613

1. Entity Name

LUSTER-ALL PASTORAL CARE AND CULTURAL CENTER, IN

Principal Place of Business	Mailing Address
5726 DEER TRACKS TRAIL LAKELAND FL 33811	5726 DEER TRACKS TRAIL LAKELAND FL 33811

DO NOT WRITE IN THIS SPACE

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 58-2254503 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LESTER, HARVEY J
5726 DEER TRACK TRAIL
LAKELAND FL 33811

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***

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LESTER, HARVEY J 5726 DEER TRACKS TRAIL LAKELAND FL 33811	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D Lester, Harvey J. 5726 Deer Track Trail Lakeland, FL 33811	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD JACKSON, LORRI 120 W VALENCIA ST LAKELAND FL 33805	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/D Charles Luster 1853 E. Main St. Lakeland, FL 33801	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD KURNS, DON 2119 CABERNET COURT EAGLE LAKE FL 33839	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T/D J. Faye Bradshaw 1528 Robin Hood's Trail Lakeland, FL 33809	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: J. Faye Bradshaw SIGNATURE REQUIRED J. Faye Bradshaw Jan 4, 2001 863 533-2359
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #