

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000001398

1. Entity Name

FIRST JERUSALEM COMMUNITY CHURCH, INC.

Principal Place of Business

Mailing Address

38322 JAMESTOWN RD
UMATILLA FL 32784

38322 JAMESTOWN RD
UMATILLA FL 32784

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

26-1264843

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

OGISTE, GREGORY SR.
30849 VISTA VIEW
MOUNT DORA FL 32757

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 PD ☐ Delete
NAME OGISTE, GREGORY SR.
STREET ADDRESS 30849 VISTA VIEW
CITY-ST-ZIP MOUNT DORA FL 32757

TITLE ☐ Change ☒ Addition
NAME D ALEX ROBINSON SR.
STREET ADDRESS 13503 LK. CAWOOD DR.
CITY-ST-ZIP WINDERMERE FL 34786

TITLE VD ☐ Delete
NAME OGISTE, ANGELA
STREET ADDRESS 30849 VISTA VIEW
CITY-ST-ZIP MOUNT DORA FL 32757

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

TITLE D ☐ Delete
NAME BRYANT, EMMA
STREET ADDRESS 17006 MILLS ST
CITY-ST-ZIP UMATILLA FL 32784

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

TITLE TD ☐ Delete
NAME BRYANT, ROBERT L SR.
STREET ADDRESS 17006 MILLS ST
CITY-ST-ZIP UMATILLA FL 32784

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

TITLE D ☐ Delete
NAME GREEN, JOHN E SR.
STREET ADDRESS 38851 MARSHALL ST
CITY-ST-ZIP UMATILLA FL 32784

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

TITLE SD ☐ Delete
NAME SILAS, DERRIS N
STREET ADDRESS 38946 SALLY ST
CITY-ST-ZIP UMATILLA FL 32784

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:

Gregory Ogiste Sr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-13-02
Date

407-832-1429
Daytime Phone #

CR2E037 (9/01)