

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P34622

1. Entity Name

PRESBYTERIAN CHURCH IN AMERICA FOUNDATION, INC.

FILED

Feb 11, 2002 8:00 am  
Secretary of State

02-11-2002 90045 043 \*\*\*\*70.00

Principal Place of Business

1700 NORTH BROWN ROAD  
SUITE 103  
LAWRENCEVILLE GA 30043

Mailing Address

1852 CENTURY PLACE, SUITE 180  
ATLANTA GA 30345

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

1700 North Brown Road

Suite, Apt. #, etc.

Suite 103

City & State

Lawrenceville GA

4. FEI Number

58-1412526

Applied For

Not Applicable

Zip

Country

Zip

Country

30043

Gwinnett

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

OWENS, JEAN  
13003 WATERFORD RUN DR.  
RIVERVIEW FL 33569

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 P  
NAME STAIR, RANDEL N  
STREET ADDRESS 3806 AVER LANE  
CITY-ST-ZIP ATLANTA GA 30329 ☐ Delete

TITLE D  
NAME Charles W. Francis, Jr.  
STREET ADDRESS 355 Montevillo Drive  
CITY-ST-ZIP Atlanta, GA 30342 ☐ Change ☒ Addition

TITLE V  
NAME BAXTER, CHARLES E  
STREET ADDRESS 2556 OAKWOOD TRACE  
CITY-ST-ZIP SMYRNA GA 30080 ☒ Delete

TITLE D  
NAME Willis L. Frazer  
STREET ADDRESS 1023 Oakridge Rd.  
CITY-ST-ZIP Clarkdale, MS 38614 ☐ Change ☒ Addition

TITLE D  
NAME SCHRIVER, WALTER JEROME  
STREET ADDRESS 580 CORDYDON LANE  
CITY-ST-ZIP ALPHARETTA GA 30022 ☐ Delete

TITLE C  
NAME David H. Clelland  
STREET ADDRESS 2706 Foxboro Rd.  
CITY-ST-ZIP Richardson, TX 75082 ☐ Change ☒ Addition

TITLE D  
NAME HASKEW, W D  
STREET ADDRESS 4854 SHADY WATERS LANE  
CITY-ST-ZIP BIRMINGHAM AL 35243 ☒ Delete

TITLE D  
NAME Robert C. Ham  
STREET ADDRESS 4690 Oxford Circle  
CITY-ST-ZIP Macon, GA 31210 ☐ Change ☒ Addition

TITLE D  
NAME HARRIS, MARK W  
STREET ADDRESS 3464 BOSTON TOWNSHIP LINE RD  
CITY-ST-ZIP RICHMOND IN 47374 ☒ Delete

TITLE D  
NAME William F. Farrell  
STREET ADDRESS 3131 Maple Ave. Apt. 11E  
CITY-ST-ZIP Dallas, TX 75201 ☐ Change ☒ Addition

TITLE SD  
NAME ALBRITTON, JOHN N  
STREET ADDRESS 3112 JAMESTOWN RD  
CITY-ST-ZIP RICHMOND IN 47374 ☐ Delete

TITLE D  
NAME Ronald A. Kohlin  
STREET ADDRESS 1693 Breton Ave.  
CITY-ST-ZIP N. ceville, FL 32578 ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 persons empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)