

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 729790

1. Entity Name

KOREAN BAPTIST CHURCH OF TAMPA, INC.

FILED
Feb 08, 2000 8:00 am
Secretary of State

02-08-2000 90140 010 ****61.25

Principal Place of Business
6020 NORTH CHURCH AVENUE
TAMPA FL 33614-5602

Mailing Address
6020 NORTH CHURCH AVENUE
TAMPA FL 33614-5602

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1656411

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

WON, CHUN SOO
6020 N. CHURCH AVENUE
TAMPA FL 33614

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 WON, CHUN SOO
STREET ADDRESS 14510 MARKLAND GREENS PL
CITY-ST-ZIP TAMPA FL 33625

TITLE PD ☐ Change ☒ Addition
NAME WON, CHUN SOO
STREET ADDRESS 14510 MARKLAND GREENS PL
CITY-ST-ZIP TAMPA FL 33625

TITLE VD ☐ Delete
NAME DANIEL KOON JA
STREET ADDRESS 5319 WATSON ROAD
CITY-ST-ZIP RIVERVIEW FL 33569

TITLE VD ☐ Change ☒ Addition
NAME DANIEL KOON JA
STREET ADDRESS 5319 WATSON RD
CITY-ST-ZIP RIVERVIEW FL 33569

TITLE TD ☒ Delete
NAME FAULKNER, PATRICK
STREET ADDRESS 11009 SUNSWEEP PL
CITY-ST-ZIP TAMPA FL 33624

TITLE TD ☐ Change ☒ Addition
NAME NAM, YOUNG S
STREET ADDRESS 7102 N. ARMENIA AVE
CITY-ST-ZIP TAMPA FL 33604

TITLE SD ☐ Delete
NAME NAM, YOUNG S
STREET ADDRESS 7102 N. ARMENIA AVENUE
CITY-ST-ZIP TAMPA FL 33604

TITLE SD ☐ Change ☒ Addition
NAME YOO, MEE SOOK
STREET ADDRESS 10109 PEPPERIDGE COURT
CITY-ST-ZIP TAMPA FL 33615

TITLE D ☐ Delete
NAME YOO, MEE SOOK
STREET ADDRESS 10109 PEPPERIDGE COURT
CITY-ST-ZIP TAMPA FL 33615

TITLE D ☐ Change ☒ Addition
NAME KIM, TEAK S
STREET ADDRESS 301 E. CLUSTER AVE
CITY-ST-ZIP TAMPA FL 33604

TITLE D ☐ Delete
NAME KIM, TEAK S
STREET ADDRESS 301 E. CLUSTER AVENUE
CITY-ST-ZIP TAMPA FL 33604

TITLE D ☐ Change ☒ Addition
NAME KIM, PAN DO
STREET ADDRESS 1551 Distant Oaks Dr.
CITY-ST-ZIP Wesley Chapel, FL 33643

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #