2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000004581

1. Entity Name

URANTIA ASSOCIATION OF FLORIDA CORPORATION

Principal Place of Business

Mailing Address

3. Mailing Address

4411 W.T Cilbu Ave

3817 GATEWOOD DRIVE SARASOTA FL 34232

2. Principal Place of Business

4411 W. Trilby Avenue

3817 GATEWOOD DRIVE SARASOTA FL 34232-3321

US

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

03-04-2000 90047 037 ****61.25



Suite, Apt.	pt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State City & State			<u></u>	4. FEI Numbe	4. FEI Number		plied For	
1 AMP	A, FLORIDA	1 AMPA FL			59-3238898	Not	t Applicable	
3361 V	Country	33616	Country	5. Certificate		\$8.75 Addi Fee Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
				Name Richard Ziglar				
BRINKMAN, RICHARD			Street A	Street Address (P.O. Box Number is Not Acceptable) 300 Inter Coastal Place				
			30	300 Intercoastal Place				
3817 GATEWOOD DRIVE			#303					
SARASOTA FL 34232								
				City Tequesta FL 33469				
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 2 25-99								
SIGNATURE Signature, typed or printed name of registered igent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE								
Organization, types or printed mains or registrated agont and the interpretability. The Lattragement agont organization requires a contracting of the contracting of								
			- t t		Males Oback F	la salala da		
J	FILE NOW:	S. Election Campaign f Trust Fund Contribut	• —	\$5.00 May Be Added to Fees	Make Check P	·	ļ	
	FEE IS \$61.25	Indistruma Commodi	IOII.	Added to Fees	Department	OI State	1	
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10								
TITLE	PD	Delete	TITLE	60		☐ Change	Addition §	
NAME	BRINKMAN, RICHARD	P	NAME	Richard Z	iglar ermastal Place		·`\	
STREET ADDRESS	3817 GATEWOOD DRIVE		STREET ADDRESS	300 Inte	erwastal Place	,≠+ 30°	> {	
CITY-ST-ZIP	SARASOTA FL 34232		CITY-\$T-ZIP	Tequesto	FL 33469		1.5	
TITLE	TD	Delete	TITLE	TH		☐ Change	Addition C	
NAME	KREIDLER, JEANNE	, ,	NAME	Patricia	Stawin			
STREET ADDRESS	2215 SW 14TH AVE #61	STREET ADDRESS						
CITY-ST-ZIP	OCALA Fl. 34471		CITY-ST-ZIP	TAMPA, F	- 33616			
TITLE	VP	Delete	TITLE	SD		☐ Change	Addition	
NAME	HOGG, JOAN	•••	NAME	mary Lo	idish ard St. # R			
STREET ADDRESS	808 GULF BLVD		STREET ADDRESS	915 Ball	ard St. 44 K)	1	
CITY-ST-ZIP	INDIAN ROCKS BEACH FL		CITY-ST-ZIP	Altamont	e Springs, FL3	790 11		
TITLE	SD	Delete	TITLE		_	Change	Addition	
NAME	MCKNIGHT, HARRY		NAME STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	14 ESCONDIDO CT 135	:04	CITY-ST-ZIP				1	
	ALTMONTE SPRINGS FL 32701-45			VPD	1 _	₩ Changa	Addition	
TITLE	VPD	☐ Delete	TITLE NAME	VP David M	antz	Change	Addition	
NAME STREET ADDRESS	MANTZ, DAVID 5395 47 AVE N		STREET ADDRESS	7703 Un	1910 Ans, #191		Ì	
CITY-ST-ZIP	BELLEVIEW FL 34420		CiTY-ST-ZIP	Tackson	ville FL 322	H		
TITLE	DECELTICAT I C OTTEO	Delete .	TITLE	- ~ ~ <u>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~</u>	VIIIL PE JOS	Change	Addition	
NAME		- Calara	NAME					
STREET ADDRESS	·		STREET ADDRESS					
CITY-ST-ZIP) ·		CITY-ST-ZIP				J	
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/00

813-226-8844

Daytime Phone

:R2E037 (9/99)