

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000003628

1. Entity Name

PRESBYTERIAN CHURCH (U.S.A.) FOUNDATION, INCORPO

FILED
Mar 14, 2000 8:00 am
Secretary of State

03-14-2000 90189 001 ***122.50

Principal Place of Business

Mailing Address

200 EAST TWELFTH STREET
JEFFERSONVILLE IN 47130

200 EAST TWELFTH STREET
JEFFERSONVILLE IN 47130-3854

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-1440115

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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 PCEO ☐ Delete
NAME CARR, LARRY D
STREET ADDRESS 200 EAST TWELFTH STREET
CITY-ST-ZIP JEFFERSONVILLE IN 47130

TITLE ☒ Change ☐ Addition
NAME Robert E. Leech
STREET ADDRESS
CITY-ST-ZIP

TITLE SRVD ☐ Delete
NAME MURPHY, DENNIS J
STREET ADDRESS 200 EAST TWELFTH STREET
CITY-ST-ZIP JEFFERSONVILLE IN 47130

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

TITLE T ☐ Delete
NAME GISH, TAMMY B
STREET ADDRESS 200 E TWELFTH ST
CITY-ST-ZIP JEFFERSONVILLE IN

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

TITLE SD ☐ Delete
NAME KIRKPATRICK, CLIFTON
STREET ADDRESS 100 WITHERSPOON ST
CITY-ST-ZIP LOUISVILLE KY

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

TITLE T ☐ Delete
NAME BELLATTI, JAMES R
STREET ADDRESS 12 BRENTWOOD DR
CITY-ST-ZIP STILLWATER OK 74075

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

TITLE T ☐ Delete
NAME CLAY, RICHARD
STREET ADDRESS 2500 NATIONAL CITY TOWER
CITY-ST-ZIP LOUISVILLE KY 40202

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)