

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 758400

1. Entity Name

CHURCH OF SCIENTOLOGY FLAG SERVICE ORGANIZATION,

Principal Place of Business

Mailing Address

503 CLEVELAND ST  
CLEARWATER FL 33755  
US

503 CLEVELAND ST  
CLEARWATER FL 33755-4007  
US

2. Principal Place of Business

No Change

3. Mailing Address

No Change

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2143308

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

XX

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNSON, ROBERT E  
100 NORTH TAMPA STREET  
SUITE 3500  
TAMPA FL 33602

Name

Paul B. Johnson

Street Address (P.O. Box Number is Not Acceptable)

112 S. Magnolia Avenue

City

Tampa

FL

Zip Code  
33601

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

Paul B. Johnson

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/00

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 VP ☒ Delete  
NAME ANDERSON, BRIAN  
STREET ADDRESS 210 S FORT HARRISON  
CITY-ST-ZIP CLEARWATER FL

TITLE VP ☐ Change ☒ Addition  
NAME Story, Mary  
STREET ADDRESS 305 Cleveland Street  
CITY-ST-ZIP Clearwater, Florida 33755

TITLE D ☐ Delete  
NAME COOK, DEBBIE  
STREET ADDRESS 210 S FT. HARRISON  
CITY-ST-ZIP CLEARWATER FL

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

TITLE TD ☐ Delete  
NAME MEADOR, BARBARA  
STREET ADDRESS 118 N. FT. HARRISON  
CITY-ST-ZIP CLEARWATER FL 34615

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

TITLE S ☐ Delete  
NAME STILO, GLEN  
STREET ADDRESS 503 CLEVELAND STREET  
CITY-ST-ZIP CLEARWATER FL

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

TITLE P ☐ Delete  
NAME VOEGEDING, MARY  
STREET ADDRESS 118 N. FT. HARRISON  
CITY-ST-ZIP CLEARWATER FL 34615

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

TITLE D ☐ Delete  
NAME SHAW, BEN  
STREET ADDRESS 503 CLEVELAND ST  
CITY-ST-ZIP CLEARWATER FL 33755

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 OFFICIAL

GLEN E. STILO, SECRETARY

CHURCH OF SCIENTOLOGY

FLAG SERVICE ORGANIZATION, INC

Daytime Phone #

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

05-04-2000 90152 041 \*\*\*\*70.00



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)