

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 709756

FILED  
Apr 26, 2002 8:00 AM  
Secretary of State

Entity Name: CHRIST COMMUNITY CHURCH OF TAMPA, INC.

**Current Principal Place of Business:**

6202 N. HIMES AVENUE  
TAMPA, FL 33614

**New Principal Place of Business:**

**Current Mailing Address:**

6202 N. HIMES AVENUE  
TAMPA, FL 33614

**New Mailing Address:**

FEI Number: 59-1573785      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

AMAN, JEFFREY A  
14502 N DALE MABRY HWY  
STE 300  
TAMPA, FL 33618 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DT ( ) Delete  
Name: LOUER, JOHN A  
Address: 3304 OMAR AVENUE  
City-St-Zip: TAMPA, FL 33629

Title: DT ( ) Delete  
Name: MCGEE, JOHN III  
Address: 16019 SPLITLOG DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: D ( ) Delete  
Name: RUSSELL, MICHAEL E  
Address: 3118 W OAKLYN AVE  
City-St-Zip: TAMPA, FL 33609

Title: D ( ) Delete  
Name: KIRK, JOHNSTON J.  
Address: 3102 LAKESTONE DR.  
City-St-Zip: TAMPA, FL

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D/T (X) Change ( ) Addition  
Name: SCHOESSOW, GARY  
Address: 5005 ROLLESTON CT.  
City-St-Zip: TAMPA, FL 33624

Title: D (X) Change ( ) Addition  
Name: DOWNING, JIM  
Address: 3414 REYNOLDSWOOD DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: D/T (X) Change ( ) Addition  
Name: RUSSELL, MICHAEL E  
Address: 3118 W OAKLYN AVE  
City-St-Zip: TAMPA, FL 33609

Title: D/C (X) Change ( ) Addition  
Name: JOHNSTON, J KIRK  
Address: 3102 LAKESTONE DR.  
City-St-Zip: TAMPA, FL

Title: D ( ) Change (X) Addition  
Name: TOPE, GREG  
Address: 420 ST. AUGUSTINE AVENUE  
City-St-Zip: TAMPA, FL 33617

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL E. RUSSELL

D/T

04/26/2002

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date