

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 28, 2002 8:00 am**  
**Secretary of State**

04-28-2002 90785 022 \*\*\*\*61.25

**DOCUMENT # 716296**

1. Entity Name

**COVENANT PRESBYTERIAN CHURCH OF WINTER PARK, INC**

Principal Place of Business

**7540 GRAND AVE.  
 WINTER PARK FL 32792  
 US**

Mailing Address

**7540 GRAND AVE.  
 WINTER PARK FL 32792  
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-1404353**

Applied For

Not Applicable

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

**LEIGH, RICHARD A**

**~~1801 LEE RD~~ 1031 West Morse Blvd.  
~~STE 360~~ Ste 160  
 WINTER PARK FL 32789**

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	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>FITZGERALD, JIM</b>	
STREET ADDRESS	<b>3600 N CHICKASAW TRAIL</b>	
CITY-ST-ZIP	<b>ORLANDO FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>LANPHEAR, RON</b>	
STREET ADDRESS	<b>9865 LAKE GEORGIA DR</b>	
CITY-ST-ZIP	<b>ORLANDO FL 32817</b>	
TITLE	<b>DP</b>	<input type="checkbox"/> Delete
NAME	<b>BEATES, MIKE</b>	
STREET ADDRESS	<b>6724 TOTTENHAM COURT</b>	
CITY-ST-ZIP	<b>ORLANDO FL</b>	
TITLE	<b>T</b>	<input type="checkbox"/> Delete
NAME	<b>BEAVER, TIMOTHY</b>	
STREET ADDRESS	<b>609 OAK MANOR CIRCLE</b>	
CITY-ST-ZIP	<b>ORLANDO FL</b>	
TITLE	<b>SD</b>	<input type="checkbox"/> Delete
NAME	<b>WILLIS, SCOTT</b>	
STREET ADDRESS	<b>807 PONDEROSA PINE CT</b>	
CITY-ST-ZIP	<b>ORLANDO FL</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<b>5586 Ligustrum Loop</b>	
CITY-ST-ZIP	<b>Oviedo, FL 32765</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<b>3043 Nicholson Drive</b>	
CITY-ST-ZIP	<b>Winter Park, FL 32792</b>	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<b>13135 Lake Live Oak Drive</b>	
CITY-ST-ZIP	<b>Orlando, FL 32817</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<b>2825 Cedena Cove</b>	
CITY-ST-ZIP	<b>Orlando, FL 32817</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Leigh, Richard</b>	
STREET ADDRESS	<b>2121 Shady Hill Terrace</b>	
CITY-ST-ZIP	<b>Winter Park, FL 32792</b>	

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

**BEATES**

**04/12/02**

**407-671-8080**

Date

Daytime Phone #

CR2E037 (9/01)

11 Additional Officers & Directors

SD

Barnes, Robert

5516 Albert Drive

Winter Park, FL 32792

Attachment ~~to~~ Addition

DOC# 716296/642379