## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # N0100007584

MANATEE RV PARK COMMUNITY CHURCH, INC.



**FILED** Apr 02, 2003 8:00 am Secretary of State
04-02-2003 90089 027 \*\*\*\*61.25

							<b>/</b>				
Principal Place of Business 6302 U.S. HIGHWAY 41 SOUTH LOT 216 PALMETTO FL 34221			6302 U	Mailing Address 6302 U.S. HIGHWAY 41 SOUTH LOT 216 RUSKIN FL 33570							
2. Principal Place of Business			3 Mail	ing Address		<del></del> .		-			
Suite, Apt.	#, etc.	<u>-</u>	Sui	te, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State			City & State				- 4. FEI Number 26	4. FEI Number 26-0005668 Applied For			
Zip Country			Zip Country			ry	Not Applicable   S Certificate of Status Desired   \$8.75 Additional				
			<u></u>	<u></u>			Fee Required				
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
ALSTADT, FLOYD K					L	Name					
6302 U.S. HIGHWAY 41 SOUTH LOT 216 RUSKIN FL 33570				Street Address (			s (P.O. Box Number is N	ot Acceptable)			
(						City		FL	Zip Cod	e	
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. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE  SIgnature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
					9. Election Campaign Financing Trust Fund Contribution,			Make Chec Florida Depar			
10.		OFFICERS AND D	IRECTORS	<u> </u>	11.		ADDITIONS/CHANGE	S TO OFFICERS AND DI	RECTORS IN	1 10	
TITLE NAME	C ALSTADT,	FLOYD K		☐ Delete	TITLE NAME				☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	6302 US 4 RUSKIN FI	I1 SO #216 L 33570			STREET .	ADDRESS -ZIP					
TITLE	T ALLEN, JA	NE V		☐ Delete	TITLE				☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP		11 SO #153	<u>-</u> • .	ং শ⊍শাসীকল ুুুুুুুুুুুুুুুুুুুুুুুুুুুুুুুুুুুু		AODRESS - ZIP	The second secon		۔ سمجھیے ہیں۔		
TITLE NAME	T LEE, ART			Delete .	TITLE NAME				☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP		1 SO #235 L 33570				ADDRESS ZIP					
TITLE NAME	T ROGERS,			☐ Delete	TITLE				☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	6302 US 4 RUSKIN FI	11 SO #A101 L 33570			STREET A	ADORESS - ZIP					
TITLE NAME	T Decker, .			☐ Delete	TITLE NAME				Change	Addition	
STREET ADDRESS CITY-ST-ZIP	6302 US 4 RUSKIN FI	1 SO #339 L 33570			STREET A	ADDRESS -ZIP					
TITLE				☐ Delete	TITLE				☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP						ADDRESS - 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:

8136412414