

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 700068

FILED
Apr 30, 2003
Secretary of State

Entity Name: THE FIRST PRESBYTERIAN CHURCH OF SAFETY HARBOR, INC.

Current Principal Place of Business:

SAFETY HARBOR INC -THE-
255 5 AVE. SO.,
SAFETY HARBOR, FL 34695

New Principal Place of Business:

Current Mailing Address:

SAFETY HARBOR INC -THE-
255 5 AVE. SO.,
SAFETY HARBOR, FL 34695

New Mailing Address:

FEI Number: 59-1301080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAMER, HOWARD
1130 4TH ST. SOUTH
SAFETY HARBOR, FL 34695 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: P () Delete
Name: MCCOY, FRED,
Address: 555 7TH ST S
City-St-Zip: SAFETY HARBOR, FL 34695

Title: SD () Delete
Name: KRAMER, HOWARD,
Address: 1130 4TH ST S
City-St-Zip: SAFETY HARBOR, FL

Title: TD () Delete
Name: BODDEN, JUNE
Address: 3259 MARIGOLD DRIVE
City-St-Zip: CLEARWATER, FL

Title: D () Delete
Name: KRAMER, HOWARD,
Address: 1130 4TH STREET SO.
City-St-Zip: SAFETY HARBOR, FL

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: JAGER, ERIK MR
Address: 555 7TH ST S
City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: SECR (X) Change () Addition
Name: MCALLISTER, SANDRA MRS.
Address: 1632 COACHMAKERS LANE
City-St-Zip: CLEARWATER, FL 33765 US

Title: TRES (X) Change () Addition
Name: MCALLISTER, JOHN MR
Address: 1632 COACHMAKERS LANE
City-St-Zip: CLEARWATER, FL 33765 US

Title: D (X) Change () Addition
Name: BRAGDON, SHIRLEY MRS
Address: 2941 ABBEY LAKE DR
City-St-Zip: CLEARWATER, FL 33759

Title: D () Change (X) Addition
Name: ARNONE, MICHAEL MR
Address: 1321 MCMULLEN BOOTH RD
City-St-Zip: CLEARWATER, FL 33759 US

Title: D () Change (X) Addition
Name: GABBARD, VI MS
Address: 1432 KEENE RD
City-St-Zip: CLEARWATER, FL 33756 US

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: JOHN MCALLISTER

TRES

04/30/2003

Electronic Signature of Signing Officer or Director

Date