

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2001 8:00 am
Secretary of State

03-14-2001 90008 005 ****61.25

DOCUMENT # 700283

1. Entity Name

ALDERSGATE UNITED METHODIST CHURCH, INC.

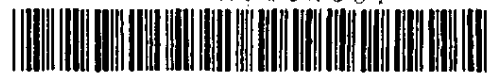
Principal Place of Business

Mailing Address

ATTN: BOARD OF TRUSTEES
 9530 STARKEY ROAD
 SEMINOLE FL 34647-2203

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 9530 STARKEY ROAD
 SEMINOLE FL 34647-2203

A0032597



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1423757

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

ENGELHARDT JR., CHARLES E.
9530 STARKEY ROAD
SEMINOLE FL 33543

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: Delete
 NAME: **D PARO, MARTIN**
 STREET ADDRESS: **9530 84TH ST N**
 CITY-ST-ZIP: **SEMINOLE FL 33777**

TITLE: Change Addition
 NAME: **Kelly CARTER**
 STREET ADDRESS: **18456 93rd WAY N**
 CITY-ST-ZIP: **LARGO, FL 33773**

TITLE: Delete
 NAME: **D JENNESS, CECIL**
 STREET ADDRESS: **6895 LAFAYETTE BLVD**
 CITY-ST-ZIP: **PINELLAS PK FL 33781**

TITLE: Change Addition
 NAME: **KRISY HOLLAND**
 STREET ADDRESS: **8001 YARDLEY AVE**
 CITY-ST-ZIP: **ST. PETERSBURG, FL 33710**

TITLE: Delete
 NAME: **D PERKINS, PAUL**
 STREET ADDRESS: **9001 65 WAY NORTH**
 CITY-ST-ZIP: **PINELLAS PARK FL 33782**

TITLE: Change Addition
 NAME: **BAL SURLS**
 STREET ADDRESS: **8586 DENISE DR.**
 CITY-ST-ZIP: **SEMINOLE, FL 33777**

TITLE: Delete
 NAME: **D BENSON, KATHERINE**
 STREET ADDRESS: **1967 CORMORANT COURT APT. 515**
 CITY-ST-ZIP: **CLEARWATER FL 33762**

TITLE: Change Addition
 NAME: **GREG ARNOLD**
 STREET ADDRESS: **8674 LANTANA DR.**
 CITY-ST-ZIP: **SEMINOLE, FL 33777**

TITLE: Delete
 NAME: **D INGRAM, JAMES**
 STREET ADDRESS: **9000 PARK BLVD. #4**
 CITY-ST-ZIP: **LARGO FL 33777**

TITLE: Change Addition
 NAME: **ROBIN BROWN**
 STREET ADDRESS: **10932 84th Ave N**
 CITY-ST-ZIP: **SEMINOLE, FL 33772**

TITLE: Delete
 NAME: **D SMITH, FAYE**
 STREET ADDRESS: **8956 91ST TERR N**
 CITY-ST-ZIP: **SEMINOLE FL**

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]* **QUAMEZA J. BEYERSDORF** 1/12/01 727-891-0218
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)

Attachment
D# 700283
A032597

Document 700283
Aldersgate United Methodist Church

1002 Uniform Business Report Addendum

Name	Title
Paro, Martin	Chair - Trustees
Perkins, Paul	Trustee
Benson, Katherine	Trustee
Ingram , James	Trustee
Carter, Kelly	Trustee
Holland, Krisy	Trustee
Surls, Bob	Trustee
Arnold, Greg	Trustee
Brown, Robin	Trustee