## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 18, 2002 8:00 am Secretary of State **DOCUMENT # 702218** 1. Entity Name 04-18-2002 90424 023 \*\*\*\*61.25 FIRST PRESBYTERIAN CHURCH OF TEQUESTA, INC. Principal Place of Business Mailing Address 482 TEQUESTA DR. 482 TEQUESTA DR. TEQUESTA FL 33469 TEOHESTA FL 33469 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-1237866 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HERSEY, DONALD D **482 TEQUESTA DRIVE TEQUESTA FL 33469** Zip Code FL 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 DATE e, typed or printed name of registered agent and title if applicable TE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PD) 🛂 🖰 😘 ☐ Addition TITLE Change Delete TITLE sene mauer ANSCHUTZ, RICHARD NAME NAME 82 Tequesta Dive STREET ADDRESS STREET ADDRESS **482 TEQUESTA DRIVE** CITY-ST-ZIP CITY-ST-ZIP TEQUESTA FL 33469 ☐ Addition Delete TITLE Change TITLE ۷D GED HOUSEholder NAME NAME MAYER, GENE 482 TEQUESTA Dr. STREET ADDRESS STREET ADDRESS 482 TEQUESTA DR CITY-ST-ZIP = CITY-ST-ZIP... **TEQUESTA FL 33469** SD 🛛 Delete TITLE Change ☐ Addition TITLE Dick Anschutz NAME NAME Snyder, Jim 482 TEQUESTO Dr. STREET ADDRESS STREET ADDRESS 482 TEQUESTA DRIVE CITY-ST-ZIP CITY-ST-ZIP TEQUESTA FL 33469 TITLE Delete TITLE Change ☐ Addition Bill Annis HOUSEHOLDER, GED NAME NAME 182 TEQUESTON Or. STREET ADDRESS STREET ADDRESS 482 TEQUESTA DR. CITY-ST-ZIP CITY-ST-ZIP TEQUESTA FL 33469 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TIT! F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 required or trustee empowered to execute this eport as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attach tent with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR

4/8/02

561-746-5161

Daytime Phone #

FILED