FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 02, 2001 8:00 am Secretary of State DOCUMENT # 703382 1. Entity Name THE CONGREGATIONAL CHURCH MOUNT DORA, FLORIDA, I 04-02-2001 90279 006 ****61.25 Principal Place of Business Mailing Address 650 N DONNELLY ST. 650 N. DONNELLY ST. MOUNT DORA FL 32757 D0030395 MOUNT DORA FL 32757 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO'NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59 6 140 982 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) KARR, NORMAN W. 2136 TOPPING PLACE EUSTIS FL 32735 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. JOHN BYGRAVE, MODERATUR Change 2681 F. WASHINGTON AVE, #26 Addition M Delete TITLE TITLE NAME KARR. NORMAN NAME EUSTIS FL 32726 STREET ADDRESS STREET ADDRESS 2136 TOPPING PL CITY-ST-ZIP CITY-ST-ZIP EUSTIS FL 32726 R ASST TREASURER Delete TITLE Change ☐ Addition TIT! F WARD, CLYDE NAME NAME STREET ADDRESS STREET ADDRESS 4269 LAKE ELEANOR DR CITY-ST-ZIP CITY-ST-ZIP **MOUNT DORA FL 32757** TREASURER TITLE Change ☐ Addition Delete TITLE ROSS, HELEN NAME NAME STREET ADDRESS STREET ADDRESS DEAN, MARY 3150 LAUREL DR CITY-ST-ZIP CITY-ST-7IP **MOUNT DORA FL 32757** PRES. OF TRUSTECS TITLE Change ☐ Addition ☐ Delete TITLE KARR, RUBY NAME NAME STREET ADDRESS STREET ADDRESS 2136 TOPPING PL CITY-ST-ZIP CITY-ST-ZIP EUSTIS FL 32726 ☐ Delete Change ☐ Addition TITLE TITLE JOHNSON, GLORIA NAME NAME STREET ADDRESS STREET ADDRESS 3281 OAK HILL RD CITY-ST-ZIP CITY-ST-ZIP MOUNT DORA FL 32757 MARY DEAN, TRUSTEE POT Change TITLE Delete TITLE **★** Addition 3150 LAUREL DRIVE WARD, NANCYLEA NAME NAME MOUNT DORA FL 32757 STREET ADDRESS STREET ADDRESS 4269 LAKE ELEANOR DR CITY-ST-ZIP CITY-ST-ZIP **MOUNT DORA FL 32757**

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

SIGNATURE: