

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

FILED
Feb 12, 2003 8:00 am
Secretary of State

02-12-2003 90067 049 ****61.25

DOCUMENT # 704157

1. Entity Name
FIRST CHRISTIAN CHURCH OF BRANDON, FLORIDA, INC.



Principal Place of Business
**207 NEW HOPE ROAD
BRANDON FL 33510-3602**

Mailing Address
**207 NEW HOPE ROAD
BRANDON FL 33510-3602**

30023633



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
1720 ST Cloud Ave
Suite, Apt. #, etc.

3. Mailing Address
1720 ST Cloud Ave
Suite, Apt. #, etc.

City & State
Valrico FL

City & State
Valrico FL

4. FEI Number **59-1888849**

Applied For
Not Applicable

Zip Country
33594 Hillsborough

Zip Country
33594 Hillsborough

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

**MCDONALD, GEORGE
1924 HORSHOE DRIVE
PLANT CITY FL 33567**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *George McDonald*
Signature, typed or printed name of registered agent and title if applicable.

**Chairman of Board
George McDonald**

1-29-03

(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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **CD** ☐ Delete
NAME **MCDONALD, GEORGE**
STREET ADDRESS **1924 HORSHOE DR.**
CITY-ST-ZIP **PLANT CITY FL 33567**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VD** ☐ Delete
NAME **LOPRESTI, NICK**
STREET ADDRESS **10108 BELL CREEK DRIVE**
CITY-ST-ZIP **RIVERVIEW FL 33569**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☐ Delete
NAME **ALLEN, JAMES**
STREET ADDRESS **2705 HERNDON CT**
CITY-ST-ZIP **VALRICO FL 33594**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Delete
NAME **BELLONE, ROBERT**
STREET ADDRESS **2315 OAKHURST CT**
CITY-ST-ZIP **VALRICO FL 33594**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☐ Delete
NAME **HEFNER, DANIEL**
STREET ADDRESS **1502 N. TAYLOR ROAD**
CITY-ST-ZIP **BRANDON FL 33510**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *George McDonald*
Signature, typed or printed name of signing officer or director

1-29-03

913-689-1457

Date

Daytime Phone #

CR2E037 (10/02)