## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # 704350 Jun 29, 2000 8:00 am Secretary of State REDEEMER LUTHERAN CHURCH OF MANATEE COUNTY, FLO 05-04-2000 90132 023 \*\*\*\*61.25 Principal Place of Business Mailing Address 6311 THIRD AVENUE WEST 6911 THIRD AVENUE WEST **BRADENTON FL 34209 BRADENTON FL 34209-2312** 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 59-1301489 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent Name Address (P.O. Box Number is Not Acceptable) MCFARLAND, RICHARD 7312 5TH AVE NW **BRADENTON FL 34209** 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 (NOTE: Registered Agent signature required when reinstating 9. Election Campaign Financing Make Check Payable to **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 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE SECRETARY ARTLEY, WARREN NAME PAT BENSON 6316 8TH ST CT W 3508 WOOD QUE GRELL STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY ST. 71P BRADENTON FL 34207 BRADENTON, FL 34 210 Addition TITLE VICE-PRESIDENT ☐ Change Delete DANIELS, JOHN JACK MONTHETH 3311 47th STW NAME NAME STREET ADDRESS STREET ADDRESS 9254 13TH AVE CR NW CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** Addition TITLE ☐ Change TITLE Delete MCFARLAND, RICHARD NAME NAME STREET ADORESS STREET ADDRESS 7312 5TH AVE NW CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL 34209 ☐ Addition TITLE PRESIDENT Change TITI F ☐ Delete NAME PRICK, DAN-NAME DAN PRICE STREET ADDRESS STREET ADDRESS 1306 63RD ST W 1306 63 RD ST W CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE TITLE ☐ Change Delate NAME NAME STREET ADDRESS 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. 00 SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR