2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 29, 2001 8:00 am Secretary of State **DOCUMENT # 706684** 1. Entity Name TRUSTEES OF FIRST ADVENT CHRISTIAN CHURCH OF TAM 01-29-2001 90140 041 ****61.25 Principal Place of Business Mailing Address ADVENT CHRISTIAN CHURCH ADVENT CHRISTIAN CHURCH 919 WEST KIRBY 919 WEST KIRBY 907160 **TAMPA FL 33604** TAMPA FL 33604 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-0998542 Not Applicable Zip Country Country \$8.75 Additional 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) BRANAN, FRANCES 311 W. HILDA STREET **TAMPA FL 33603** 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 9. Election Campaign Financing **FILE NOW:** Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition BRANAN, FRANCES R. NAME NAME STREET ADDRESS 311 W. HILDA ST. STREET ADDRESS CITY-ST-ZIP C!TY-ST-ZIP TAMPA FL TITLE VD. ☐ Delete TITLE VD X Change Addition NAME TUVELL. PAUL NAME Tuvell, vPaul STREET ADDRESS 418 W-NORTH BAY ST---STREET ADDRESS 1017 Bennett Lane CITY-ST-ZIP CITY-ST-ZIP TAMPA FL Brooksville, FL 34609-6963 TITLE S ☐ Delete TITLE r∰ Change ☐ Addition NAME HETT, CINDY NAME Peg Williams STREET ADDRESS 528 2ND AVE SW STREET ADDRESS 2611 Fiddlestick Circle CITY-ST-ZIP CITY-ST-78 LUTZ FL Lutz, FL 33549-3728 ☐ Delete TITLE X Change ☐ Addition NAME HETT, STEVEN NAME Mandolini, Marsha STREET ADDRESS STREET ADDRESS 528 2ND AVE SW 2202 Dumbarton Waye CITY-ST-ZIP CITY-ST-ZIP Lutz FL Valrico, FL 33594 T(T) F ☐ Delete TITLE (X) Change ☐ Addition Tuvell, Linda NAME TURELL, LINDA NAME STREET ADDRESS 11331 BROADVIEW DR. STREET ADDRESS 1017 Bennett Lane CITY-ST-ZIP CITY-ST-ZIP SEFFNER FL 33584 Brooksville, FL 34609-6963 TITLE ☐ Delete TITLE Change ☐ Addition 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 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.

Peg Williams RE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNI