

**FILED**  
**Aug 22, 2001 8:00 am**  
**Secretary of State**

05-15-2001 90076 025 \*\*\*\*61.25

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 707163

1. Entity Name

JOHN CALVIN PRESBYTERIAN CHURCH, OF TAMPA, FLORI



Principal Place of Business

 6501 NORTH NEBRASKA AVENUE  
 TAMPA FL 33604  
 US

Mailing Address

 6501 N. NEBRASKA AVE.  
 TAMPA FL 33604


2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number 59-1031280

Applied For

Not Applicable

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

 STEELE, HOLLY  
 7207 9ST N  
 TAMPA FL 33604

Name

GLORIA AGUAYO

Street Address (P.O. Box Number is Not Acceptable)

2012 E. Patterson St.

City

Tampa

FL

33610

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

(NOTE: Registered Agent signature required when reinstating)

7/18/01

DATE

 FILE NOW: FEE IS \$61.25  
 After September 12, 2001, min. will be \$236.25
9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

 Make Check Payable to  
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

 TITLE NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 D COULL, GEORGE  
 1009 E NORTH ST  
 TAMPA FL ☐ Delete

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

 TITLE NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 P STEELE, HOLLY V  
 7207 9TH ST N.  
 TAMPA FL 33604 ☒ Delete

 TITLE NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 D GLORIA AGUAYO  
 2012 E PATTERSON ST  
 TAMPA FL ☐ Change ☒ Addition

 TITLE NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 D CHENEY, MARY  
 704 E NORFOLK ST  
 TAMPA FL 33604 ☐ Delete

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

 TITLE NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 D GARRETT, PAUL  
 8402 PACKWOOD AVE N  
 TAMPA FL 33604 ☒ Delete

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

 TITLE NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

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

 TITLE NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE S COULL

7/18/01

Date

813-239-2464

Daytime Phone #

CR2E037 (5/01)