

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 707623

1. Entity Name

RIO VISTA UNITED PRESBYTERIAN CHURCH U.S.A., INC

Principal Place of Business

600 83RD AVE NE  
ST PETERSBURG FL 33702

Mailing Address

600 83RD AVE NE  
ST PETERSBURG FL 33702-2700

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1895312

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, CHARLOTTE  
248 79TH AVE NE  
ST. PETERSBURG FL 33702

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(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  
Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	TICE, ROBERT	
STREET ADDRESS	5850 21ST ST. N. #H-7	
CITY-ST-ZIP	ST PETERSBURG FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BOHMS, VIRGIL	
STREET ADDRESS	1011 GANDY BLVD N 100	
CITY-ST-ZIP	ST PETERSBURG FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	COVINGTON, MURIEL	
STREET ADDRESS	1191 77TH AVE N	
CITY-ST-ZIP	ST PETERSBURG FL	
TITLE	DT	<input type="checkbox"/> Delete
NAME	HOLIFIELD, RHONDA	
STREET ADDRESS	1420 21ST AVE N	
CITY-ST-ZIP	ST PETERSBURG FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	ALFORD, TIM	
STREET ADDRESS	3001 E VINA DEL MAR BLVD	
CITY-ST-ZIP	ST PETERSBURG FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	ORAND, EARL	
STREET ADDRESS	301 E VINA DEL MAR BLVD	
CITY-ST-ZIP	ST PETE BEACH FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Frank VanderKraats	
STREET ADDRESS	4220 Poinsettia Drive	
CITY-ST-ZIP	St. Pete Beach, FL 33706	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rhonda Holifield	
STREET ADDRESS	1420 21st Ave. N.	
CITY-ST-ZIP	St. Petersburg, FL 33704	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: Charlotte H. Steele, Pres.

March 2, 2000 (727) 577-5855

Date

Daytime Phone #

CR2E037 (9/99)