

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 707813

1. Entity Name

THE ST. PAULS UNITED METHODIST CHURCH, INC.

FILED
Mar 30, 2001 8:00 am
Secretary of State

03-30-2001 90339 019 ****61.25

Principal Place of Business

1591 HIGHLAND AVENUE
EAU GALLIE FL 32935

Mailing Address

1591 HIGHLAND AVENUE
EAU GALLIE FL 32935

00029832



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

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

HAMM, ERICH
2076 TREVINO CIRCLE
MELBOURNE FL 32935

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PC
PALMER, GEORGE E.
1881 PINEAPPLE AVE
MELBOURNE FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
BERTRAND, EDWARD
2001 THISTLE DR
MELBOURNE FL 32935 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
Richard Flamm
1992 Adams Ave.
Melbourne, FL. 32935 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
PEGAM, BARBAR
1135 CARISSA PL
MELBOURNE FL 32935 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SYLVESTER, TOM
2767 VILLAGE PARK DR
MELBOURNE FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PARKER, BILL
1325 HIAWATHA ST
MELBOURNE FL 32935 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Robert Helfrich
2123 Leewood Blvd.
Melbourne, FL. 32935 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HINES, BILL
784 INDIAN RIVER DR
MELBOURNE FL 32935 ☐ 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

Date

Daytime Phone #

CR2E037 (10/00)