

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 708521

1. Entity Name

CHURCH OF CHRIST AT FLORIDA AVENUE, INC.

Principal Place of Business

Mailing Address

1281 FLORIDA AVE NE  
PALM BAY FL 32905

1281 FLORIDA AVE NE  
PALM BAY FL 32905-2662

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1531328

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

EDWARD CALDWELL  
1309 GIBBS ST.  
MELBOURNE FL 32901

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 DS ☐ Delete  
NAME CLEVELAND, ADDERLEY  
STREET ADDRESS 3112 PLUMMER CIR.  
CITY-ST-ZIP MELBOURNE FL

TITLE DS ☐ Change ☐ Addition  
NAME CLEVELAND, ADDERLEY  
STREET ADDRESS 1032 HOMEMOOD AVE.  
CITY-ST-ZIP N. MELBOURNE, FL 32940

TITLE D ☐ Delete  
NAME WILLIE HOLMES  
STREET ADDRESS 1190 BAY DR. EAST  
CITY-ST-ZIP INDIAN HARBOUR BCH FL

TITLE D ☐ Change ☐ Addition  
NAME WILLIE HOLMES  
STREET ADDRESS 1190 BAY DR. EAST  
CITY-ST-ZIP INDIAN HARBOUR BCH FL 32937

TITLE DC ☒ Delete  
NAME C.L. SPIVEY  
STREET ADDRESS 390 GODFREY RD SE  
CITY-ST-ZIP PALM BAY FL

TITLE DC ☐ Change ☒ Addition  
NAME R.L. JOHNSON  
STREET ADDRESS 3427 MONROE ST.  
CITY-ST-ZIP MELBOURNE, FL 32901

TITLE PT ☐ Delete  
NAME CALDWELL, EDWARD J.  
STREET ADDRESS 1309 GIBBS STREET  
CITY-ST-ZIP MELBOURNE FL

TITLE PT ☐ Change ☐ Addition  
NAME CALDWELL, EDWARD J.  
STREET ADDRESS 1309 GIBBS STREET  
CITY-ST-ZIP MELBOURNE, FL 32901

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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:

Robert L. Johnson  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

09-31-00

321 9568375