

# 2000 UNIFORM BUSINESS REPORT (UBR)

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**FILED**  
**May 08, 2000 8:00 am**  
**Secretary of State**

04-17-2000 90051 049 \*\*\*\*61.25

**DOCUMENT #** 710952 ✓  
**1. Entity Name**  
 SOUTHMINSTER PRESBYTERIAN CHURCH  
 INCORPORATED

**Principal Place of Business**      **Mailing Address**  
 730 Beville Road  
 Daytona Beach FL 32114

**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** 59-2009668      **Applied For**  
 Not Applicable

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**  
 Hugh Clarke  
 1189 Avenida Del Toro  
 Daytona Beach FL 32119

**7. Name and Address of New Registered Agent**  
 Name Donna M. Visscher  
 Street Address (P.O. Box Number is Not Acceptable)  
 5232 Riverside Dr.,  
 Daytona  
 City Daytona Beach FL Zip Code 32127

**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** Donna M. Visscher      Donna M. Visscher, Clerk of Session 3/27/00  
(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**

<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>President</b> <input checked="" type="checkbox"/> Delete Marjorie F. Henderson 1601 Big Tree Rd., Daytona Bch FL 32119
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>Vice President</b> <input checked="" type="checkbox"/> Delete Richard A. Sieman 108 Surf Scooter Dr., Daytona Bch FL 32119
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>Secretary</b> <input checked="" type="checkbox"/> Delete Betty J. Wicks 396 Yorktown Dr., Daytona Bch FL 32119
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>Treas.</b> <input checked="" type="checkbox"/> Delete Robert E. Kent 193 Gull Dr., S. Daytona FL 32119
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>Earl Tweedie, President</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 140 Bermuda Petrel Ct., Daytona Beach FL 32119
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>Don Bailey, Vice President</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 189-Gull Dr.S., Daytona Beach FL 32119
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>Ed Harvey, Treasurer</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 905 Pelican Bay Dr., Daytona Beach FL 32119
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>Donna M. Visscher, Secretary</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5232 Riverside Dr., Daytona Beach FL 32127
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:** Donna M. Visscher      Donna M. Visscher, Clerk of Session      3/27/00      (904)761-5585  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E037 (9/99)