2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2003 8:00 am
Secretary of State
01-30-2003 90133 006 ****61.25

DOCUMENT # 711686

1. Entity Name
RIVIERA UNITED METHODIST CHURCH, INC.

90013695

☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
175 - 62ND AVENUE N. ST PETERSBURG FL 33702	175 - 62ND AVENUE N. ST PETERSBURG FL 33702

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 59-1362370 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BRADLEY, JEFF
3250 39 TH ST NORTH
ST. PETERSBURG FL 33702

7. Name and Address of New Registered Agent

Name JOSEPH C LUCAS
Street Address (P.O. Box Number is Not Acceptable) 1325 SNELL ISLE BLVD NE #217
City ST PETERSBURG FL Zip Code 33704

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ 1/27/03
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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T THOMPSON, ANGELA 1500 WEEDON DRIVE SAINT PETERSBURG FL 33702	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JANE MULLIGAN 2425 ANDALUSIA WAY NE St. Petersburg, Fl. 33704	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MITCHELL, DOUG 233 NW MONROE CIR N SAINT PETERSBURG FL 33702	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MARION LESTER 6254 Pershing St. NE St. Petersburg Fl 33702	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GILKES, LYNNE 5133 VENETIAN BLVD. SAINT PETERSBURG FL 33703	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Joseph Lucas 1325 SNELL Isle Blvd NE #217 St. Petersburg, Fl. 33704	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BODDICKER, SUE 151 NE LINCOLN CIR NORTH SAINT PETERSBURG FL 33702	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SCHNELL, MARGARET 6301 13TH ST. N SAINT PETERSBURG FL 33702	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC BRADLEY, JEFF 3250 39 STREET NORTH SAINT PETERSBURG FL 33702	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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 REQUIRED Joseph Lucas 1/27/03 727.894.6462
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #