

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 720265**

1. Entity Name

MT. MORIAH CHRISTIAN CHURCH, INC.**FILED**
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90068 004 ****70.00

Principal Place of Business

Mailing Address

**4335 CLARK RD.
SARASOTA FL 34233****3151 BERNADETTE LANE
SARASOTA FL 34234-7903
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2741405

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****BARBER, THOMAS C.
3151 BERNADETTE LANE
SARASOTA FL 34234**

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	☐ Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition
	T	ABNER, WILLIE	3002 BUNCHE ST. SARASOTA FL 34234	☐					☐	☐
	D	TUNSTALL, MICHAEL	1326 13TH ST. SARASOTA FL 34234	☐					☐	☐
	D	CANNON, CHARLES	1018 4TH STREET, W. BRADENTON FL 34205	☐					☐	☐
	PD	TUNSTALL, WESLEY	1326 13TH ST SARASOTA FL 34236	☐					☐	☐
	VD	BARBER, THOMAS	3151 BERNADETTE LANE SARASOTA FL 34234	☐					☐	☐
	S	STEPHENS, CLARK	2115 16TH AV. E BRADENTON FL 34208	☐					☐	☐

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

THOMAS C. BARBER **2/21-00** **(941)363-0900**

Date

Daytime Phone #

CR2E037 (9/99)