

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 726564

1. Entity Name

PINELANDS CONTINUING PRESBYTERIAN CHURCH, INC.

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90214 014 ****70.00

Principal Place of Business

Mailing Address

CHURCH, INC.
 10201 BAHIA DRIVE
 MIAMI FL 33189

CHURCH, INC.
 10201 BAHIA DRIVE
 MIAMI FL 33189-1424

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

59-0993237

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WATERS, MARK R
 18821 S.W. 97TH AVENUE
 MIAMI FL 33157

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: PD Delete
 NAME: WATERS, MARK
 STREET ADDRESS: 18821 S.W. 97TH AVE.
 CITY-ST-ZIP: MIAMI FL

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

TITLE: VD Delete
 NAME: KERN, RICHARD C
 STREET ADDRESS: 23050 SW 156TH AVE
 CITY-ST-ZIP: MIAMI FL

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

TITLE: SD Delete
 NAME: FUENTES, LEO
 STREET ADDRESS: 12249 SW 249 ST
 CITY-ST-ZIP: PRINCETON FL 33032-5900

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

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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:

Leo Fuentes
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/11/00

305-235-1142

Date

Daytime Phone #

CR2E037 (9/99)