

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 728953

1. Entity Name

THE CHURCH OF THE MESSIAH OF WINTER GARDEN, INC.

Principal Place of Business

260 N. WOODLAND ST.

~~P.O. BOX 771044~~

WINTER GARDEN FL ~~34777-1044~~ 34787

Mailing Address

260 N. WOODLAND ST.

~~P.O. BOX 771044~~

WINTER GARDEN FL ~~34777-1044~~ 34787

2. Principal Place of Business

260 N. Woodland St

Suite, Apt. #, etc.

3. Mailing Address

260 N. Woodland St

Suite, Apt. #, etc.

City & State

Winter Garden FL

Zip

34787

Country

ORANGE

City & State

Winter Garden FL

Zip

34787

Country

ORANGE

6. Name and Address of Current Registered Agent

GREER, DONALD R

260 N. WOODLAND ST.

~~P.O. BOX 771044~~

WINTER GARDEN FL ~~34784~~ 34787

4. FEI Number

59-1440066

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

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

TITLE	D	<input type="checkbox"/> Delete
NAME	WALLACE, STEWART	
STREET ADDRESS	1208 MARKET DR	
CITY-ST-ZIP	WINTER GARDEN FL 34787	
TITLE	P	<input type="checkbox"/> Delete
NAME	RUTHERFORD, THOMAS	
STREET ADDRESS	116 W DIVISION ST	
CITY-ST-ZIP	WINTER GARDEN FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	GREER, DONALD R	
STREET ADDRESS	1119 OAKDALE ST	
CITY-ST-ZIP	WINDERMERE FL 34786	
TITLE	D	<input type="checkbox"/> Delete
NAME	CRISWELL, WILLIAM	
STREET ADDRESS	BOX 162	
CITY-ST-ZIP	WINDERMERE FL 34786	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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

DONALD R GREER, T.

1/8/01

407-826-2701

Date

Daytime Phone #

FILED  
Apr 26, 2001 8:00 am  
Secretary of State

04-26-2001 90318 048 \*\*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

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CR2E037 (10/00)