

2001 UNIFORM BUSINESS REPORT (UBR)

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FILED
Mar 02, 2001 8:00 am
Secretary of State

02-02-2001 90274 034 ****61.25

DOCUMENT # 732954

1. Entity Name

THE FIRST PRESBYTERIAN CHURCH OF HOMESTEAD, INC?

Principal Place of Business

47 N.W. 16TH STREET
HOMESTEAD FL 33030

Mailing Address

47 N.W. 16TH STREET
HOMESTEAD FL 33030

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

59-0803201

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DOUGLAS, ROBERT
29450 S.W. 185TH CT.
HOMESTEAD FL 33030

7. Name and Address of New Registered Agent

Name

Mary Anne Munz

Street Address (P.O. Box Number Is Not Acceptable)

23600 S.W. 162 Avenue

City Homestead

FL

Zip Code
33031

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:
FEES 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 **PD** ☒ Delete
NAME **DOUGLAS, ROBERT A.**
STREET ADDRESS **29450 S.W. 185TH CT.**
CITY-ST-ZIP **HOMESTEAD FL**

TITLE **VD** ☒ Delete
NAME **BISSELL, FRANCES**
STREET ADDRESS **14831 LINCOLN DRIVE**
CITY-ST-ZIP **HOMESTEAD FL 33033**

TITLE **TD** ☐ Delete
NAME **QUARTERMAINE, JOAN**
STREET ADDRESS **27703 SW 183 CT**
CITY-ST-ZIP **HOMESTEAD FL 33031**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Change ☐ Addition
NAME **Mary Anne Munz**
STREET ADDRESS **23600 S.W. 162 Avenue**
CITY-ST-ZIP **Homestead, Florida 33031**

TITLE **VP** ☒ Change ☐ Addition
NAME **Donald Giese**
STREET ADDRESS **17995 S.W. 296 Street**
CITY-ST-ZIP **Homestead, Florida 33031**

TITLE **Sec. D** ☒ Change ☐ Addition
NAME **Fran Bissell**
STREET ADDRESS **14831 Lincoln Drive**
CITY-ST-ZIP **Homestead, Florida 33033**

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

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

TITLE ☐ Change ☐ 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:

MARY ANNE MUNZ

Date

Daytime Phone #

CR2E037 (10/00)