

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

0063896

DOCUMENT # 733765

1. Entity Name

BOARD OF TRUSTEES, HIGHLAND UNITED METHODIST CHURCH, TAMPA, FLORIDA, INC.



FILED

03 JAN 23 AM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

HODIST CHURCH, TAMPA, FLORIDA, INC.
4212 NORTH BOULEVARD
TAMPA FL 33603-3444

Mailing Address

HODIST CHURCH, TAMPA, FLORIDA, INC.
4212 NORTH BOULEVARD
TAMPA FL 33603-3444

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 59-6137194

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

JONES, JAMES
4706 EDDY DR
TAMPA FL 33603

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

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

100010425471

01/22/03 01073 015 #61.25

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

TITLE PT ☐ Delete
NAME JONES, JAMES
STREET ADDRESS 4706 EDDY DR
CITY-ST-ZIP TAMPA FL 33603

TITLE VCT ☒ Delete
NAME FRISCO, CHARLIE
STREET ADDRESS 919 PENINSULA
CITY-ST-ZIP TAMPA FL 33603

TITLE T ☒ Delete
NAME ADAMO, BARBARA J
STREET ADDRESS 218 S MACDILL AVE
CITY-ST-ZIP TAMPA FL 33609

TITLE TS ☒ Delete
NAME ROBERTS, GRACE
STREET ADDRESS 2701 ESSEX CT
CITY-ST-ZIP TAMPA FL 33602

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

TITLE VCT ☒ Change ☐ Addition
NAME Paul King
STREET ADDRESS 702 W. Emma St.
CITY-ST-ZIP Tampa, FL 33603

TITLE T ☒ Change ☐ Addition
NAME Stephen White
STREET ADDRESS 1533 W. Park Lane
CITY-ST-ZIP Tampa, FL 33603

TITLE TS ☒ Change ☐ Addition
NAME Doneta Canner
STREET ADDRESS 901 W. Candlewood Ave.
CITY-ST-ZIP Tampa, FL 33603

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:

[Signature]
SIGNED AND REQUIRED

1-8103

CR2E037 (10/02)