

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 738596

1. Entity Name

PEACE LUTHERAN CHURCH, INC.

Principal Place of Business

3650 17TH STREET
SARASOTA FL 34235
US

Mailing Address

2929 RIVIERA DR
SARASOTA FL 34232-4445
US

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

59-1716388

Applied For

Not Applicable

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

CARREIRA, DANIEL
7498 ELEANOR CIRCLE
SARASOTA FL 34243

Name

Robert Ashburn

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

2929 Riviera Drive

City

Sarasota

FL

Zip Code
34232

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

Robert Ashburn

Robert Ashburn, Director

April 27, 2000

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	<input checked="" type="checkbox"/> Delete
NAME	CARREIRA, DANIEL	
STREET ADDRESS	7498 ELEANOR CIRCLE	
CITY-ST-ZIP	SARASOTA FL 34243	
TITLE	D	<input type="checkbox"/> Delete
NAME	ASHBURN, ROBERT	
STREET ADDRESS	2929 RIVIERA DR	
CITY-ST-ZIP	SARASOTA FL 34232	
TITLE	SD	<input type="checkbox"/> Delete
NAME	ZUKOWSKI, KARIN	
STREET ADDRESS	4607 MINK ROAD	
CITY-ST-ZIP	SARASOTA FL 34235	
TITLE	D	<input type="checkbox"/> Delete
NAME	NYE, WILLIAM	
STREET ADDRESS	3908 PANOLA LANE	
CITY-ST-ZIP	SARASOTA FL 34235	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Marthe Hildreth	
STREET ADDRESS	5411 Barbarossa Avenue	
CITY-ST-ZIP	Sarasota, FL 34235	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Amy Hildreth-Rader	
STREET ADDRESS	805 67th Ave W	
CITY-ST-ZIP	Bradenton, FL 34207	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gayle Hines	
STREET ADDRESS	8416 Cypress Lake Cir	
CITY-ST-ZIP	Sarasota, FL 34243	
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:

Robert Ashburn

Robert Ashburn, Director 4/27/00 941-366-7047

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90172 012 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)