

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 739156

1. Entity Name

COMMUNITY CHRISTIAN ASSEMBLY OF GOD OF JUPITER/T

FILED
Feb 15, 2000 8:00 am
Secretary of State

02-15-2000 90064 015 ****61.25

Principal Place of Business

Mailing Address

100 S. PENNOCK LANE
JUPITER FL 33458

100 S. PENNOCK LANE
JUPITER FL 33458-7545

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

59-1874899

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

VOLPE, ROBERT M.
903 OAK CIR
JUPITER FL 33458

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	SD	<input type="checkbox"/> Delete
NAME	EIDSON, ROBERT	
STREET ADDRESS	17114 123RD TERR N	
CITY-ST-ZIP	JUPITER FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	VOLPE, ROBERT M.	
STREET ADDRESS	903 OAK CIR	
CITY-ST-ZIP	JUPITER FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HANNIFORD, EARL	
STREET ADDRESS	11277 153RD RD N	
CITY-ST-ZIP	JUPITER FL 33478	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	THOMAS, LARRY	
STREET ADDRESS	1048 EGRET CIR	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE	D	<input type="checkbox"/> Delete
NAME	PALUSIS, MARK	
STREET ADDRESS	6190-6 RIVERWALK LANE	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE	D	<input type="checkbox"/> Delete
NAME	DRELL, LANCE	
STREET ADDRESS	15313 CITRUS GROVE BLVD	
CITY-ST-ZIP	LOXAHATCHEE FL 33470	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	McCaun, Timothy	
STREET ADDRESS	3265 BERMUDA ROAD	
CITY-ST-ZIP	PAUM BEACH GARDENS, FL 33410	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BECKERMAN, DAN	
STREET ADDRESS	210 PENNOCK TRACE DRIVE	
CITY-ST-ZIP	JUPITER, FL 33458	
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	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DRELL, LANCE	
STREET ADDRESS	15313 CITRUS GROVE BLVD	
CITY-ST-ZIP	LOXAHATCHEE, FL 33470	

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 M. Volpe
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-9-00

Date

Daytime Phone #

CR2E037 (9/99)