

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90279 040 ****61.25

DOCUMENT # 742473

1. Entity Name

COUNTRYSIDE COVENANT CHURCH OF CLEARWATER, INC.

Principal Place of Business

Mailing Address

2289 N. HERCULES AVENUE
CLEARWATER FL 34623-2326

2289 N. HERCULES AVENUE
CLEARWATER FL 34623-2326

724061



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

3031 Countryside Blvd.

3031 Countryside Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

41C

#41C

City & State

City & State

Clearwater FL

Clearwater FL

Zip

Country

33761

USA

Zip

Country

33761

USA

4. FEI Number

51-0234469

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

ANWAY, ALLAN
2289 N HERCULES AVE
CLEARWATER FL 34623

Name

Anway, Alan

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

3031 Countryside Blvd #41C

City

Clearwater

FL

Zip Code

33761

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 **Alan Anway, Chairman**

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

(NOTE: Registered Agent signature required when reinstating)

Feb. 20, 2001

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 NAME STREET ADDRESS CITY-ST-ZIP	TT PETERSON, JACK A 1435 WESTLAKE BLVD PALM HARBOR FL 34683	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LARSON, ROBERT 2134 BEECHER RD CLEARWATER FL 33763	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CHRISTENSEN, GORDON 2289 N HERCULES AVE CLEARWATER FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/V/D PETERSON, Jack A. 1435 Westlake Blvd. Palm Harbor FL 34683	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D Kay P. Anderson 2718 Westchester Dr. N Clearwater FL 33761	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Irene Anway 3031 Countryside Blvd. #41C Clearwater FL 33761	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Charlotte Olson 29250 U.S. 19 N. Lot 501 Clearwater FL 33761	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C/D Alan Anway 3031 Countryside Blvd. #41C Clearwater FL 33761	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 an other like empowered.

SIGNATURE:

Alan Anway
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/01 727-726-0341
Date Daytime Phone #

CR2E037 (10/00)