

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

**FILED**  
**Feb 20, 2003 8:00 am**  
**Secretary of State**

02-20-2003 90141 014 \*\*\*\*61.25

0063823

**DOCUMENT # 747239**

1. Entity Name

**FLORIDA CONFERENCE OF ADVENT CHRISTIAN CHURCHES, INC.**



Principal Place of Business  
**ADVENT CHRISTIAN HOMES  
P. O. BOX 4303  
DOWLING PARK FL 32064  
US**

Mailing Address  
**ADVENT CHRISTIAN HOMES  
P. O. BOX 4303  
DOWLING PARK FL 32064  
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 **59-1633381**

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

**PUTNAM, LAURA A  
10275 227TH LANE  
LIVE OAK FL 32060**

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, 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 Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	CARTER, CRAIG	ADVENT CHRISTIAN VILLAGE	DOWLING PARK FL 32060	<input type="checkbox"/>
VD	NELSON, MILES	8905 RICARDO LANE	JACKSONVILLE FL 32216	<input type="checkbox"/>
VD	LUCAS, DOUGLAS J	3006 N DOVER RD	DOVER FL 33527	<input type="checkbox"/>
VD	VIGNALI, CARL	3932 RICHARDSON ROAD	PANAMA CITY FL 32404	<input checked="" type="checkbox"/>
PD	CARTER, J. POMEROY	10229 CR 136	LIVE OAK FL	<input type="checkbox"/>
VD	WOTTON, LUREE	22773 98TH TERRACE	LIVE OAK FL 32060	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
	WARREN III, THOMAS	8912 SNOW HILL LANE	JACKSONVILLE, FL 32221	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
	VD BUCHANAN, DAVID	812 E. PINE FOREST DR.	LYNN HAVEN, FL 32444	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

CR2E037 (10/02)

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:

*J. Pomeroy Carter, President*  
**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-11-03

386-658-3111