

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 05, 2001 8:00 am**  
**Secretary of State**

03-05-2001 90366 027 \*\*\*\*61.25

**DOCUMENT # 748387**  
 1. Entity Name  
**PEACE IN CHRIST COMMUNITY, INC.**

Principal Place of Business      Mailing Address  
**173 CORRINE PLACE**      **173 CORRINE PLACE**  
**KEY LARGO FL 33037**      **KEY LARGO FL 33037**

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      Applied For  
**59-1941633**      Not Applicable

5. Certificate of Status Desired      \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**HOYT, MARTHA P**  
**173 CORRINE PLACE**  
**KEY LARGO FL 33037**

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.  
 SIGNATURE Martha P. Hoyt      MARTHA P. HOYT      2/2/01  
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

TITLE	D	<input type="checkbox"/> Delete
NAME	SOTO, JAIME	
STREET ADDRESS	19011 STERLING DRIVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	HOYT, MARTHA	
STREET ADDRESS	173 CORRINE PLACE	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	TD	<input type="checkbox"/> Delete
NAME	SULLIVAN, DOROTHY T	
STREET ADDRESS	313 N.W. 12TH ST	
CITY-ST-ZIP	HOMESTEAD FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	CHEATHAM, MARGUERITE	
STREET ADDRESS	9412 NW 34TH ST	
CITY-ST-ZIP	SUNRISE FL	
TITLE	DV	<input type="checkbox"/> Delete
NAME	CARRION, WILLIAM	
STREET ADDRESS	POST OFFICE BOX 924541	
CITY-ST-ZIP	HOMESTEAD FL	
TITLE	DV	<input type="checkbox"/> Delete
NAME	PEMBERTON, RICHARD L	
STREET ADDRESS	140 MAPLE ST	
CITY-ST-ZIP	LEXINGTON MA 02173	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mary Hutchins	
STREET ADDRESS	P.O. Box 766	
CITY-ST-ZIP	Cataumet, MA 02534	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sullivan, Dorothy T	
STREET ADDRESS	29 Union Square	
CITY-ST-ZIP	Randolph, MA 02368	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Cheatham, Marguerite	
STREET ADDRESS	550 Kensington Road	
CITY-ST-ZIP	Southern Pines NC 28387	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Pemberton, Richard L	
STREET ADDRESS	140 Maple St	
CITY-ST-ZIP	Lexington, MA 02420	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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: Dorothy T. Sullivan      2/2/01      781-963-4466  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E037 (10/00)