2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

May 07, 2001 8:00 am-Secretary of State DOCUMENT # 749603 1. Entity Name FIRST CONGREGATIONAL COMMUNITY CHURCH OF CAPE CO 05-07-2001 90020 046 ****61.25 Principal Place of Business Mailing Address P.O. BOX 100923 212 SANTA BARBARA BLVD CAPE CORAL FL 33991 CAPE CORAL FL 33910 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1950287 Not Applicable \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent .Name Janet Calki<u>ns</u> Street Address (P.O. Box Number is Not Acceptable) WIECH, WILLIAM 1261 Biltmore Dr 1030 SE 46TH STREET **UNIT 203** Zip Code City CAPE CORAL FL 33904 33901 Ft. Myers 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. Janet Calkins. Treasurer SIGNATURE DATE Make Check Payable to 9. Election Campaign Financing **\$5.00** May Be **FILE NOW:** Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. CR2E037 (10/00) ☐ Addition TITLE MD Delete TITLE MD HALL, ROBERT NAME NAME Tague, Al STREET ADDRESS STREET ADDRESS 1302 SE 15TH 33904 912 SE 33rd St Cape Coral, Fl CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33990 X Change ☐ Addition X Delete TITLE TC TITLE NAME Shifler, Sandy NAME OSWALD, GUS STREET ADDRESS STREET ADDRESS 916 SE 16th Terrace 1214 SE VAN LOON TERRACE. CITY-ST-7IP CITY-ST-ZIE CAPE CORAL FL 33990 Cape Coral, Fl Change ---- Addition -Delete. JITLE ----TITLE SCHENK, JUDY NAME NAME STREET ADDRESS STREET ADDRESS 3613 SW 1ST CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33914 A Delete ☐ Addition 🔀 Change TITLE TITLE Т NAME NAME WIECH, WILLIAM Calkins, Janet STREET ADDRESS STREET ADDRESS 1230 SE 46TH ST. UNIT 203 33901 Ft. Myers, F1 1261 Biltmore Dr. CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33904 Change TITLE ☐ Addition ☐ Delete TITLE NAME NAME RICHARD, FLORENCE STREET ADDRESS STREET ADDRESS 619 SE 31ST STREET CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33904 Change ☐ Addition Delete TITLE NAME NAME SCHAEFFER, GORDAN VACANT STREET ADDRESS STREET ADDRESS **1212 SW 13TH STREET** CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33091 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