

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 90369 040 ****61.25

DOCUMENT # 750458

1. Entity Name

HOBE SOUND COMMUNITY PRESBYTERIAN CHURCH, INCORP

Principal Place of Business

**11933 S.E. JUNO CRESCENT
P.O. BOX 305
HOBE SOUND FL 33455**

Mailing Address

**11933 S.E. JUNO CRESCENT
P.O. BOX 305
HOBE SOUND FL 33455**

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

59-0966133

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DRUCE, SIDNEY F
100 INTERCOASTAL PLACE #406
TEQUESTA FL 33469**

7. Name and Address of New Registered Agent

Name

herbert b. barlow

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

8864 SE Pelican Island Way

City

Hobe Sound

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

Herbert B. Barlow Pres/Tras. Mar. 5, 2001
Signature, typed or printed name of registered agent and the corporation (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 NAME STREET ADDRESS CITY-ST-ZIP	PD BERLOW, HERBERT B 8864 SE PELICAN ISLAND WAY HOBE SOUND FL 33455	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STETSON, HAROLD 8542 SE ROYAL STREET HOBE SOUND FL 33455	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WILEY, DOROTHEA 6275 SE CHARLESTON PLACE HOBE SOUND FL 33455	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DRUCE, SIDNEY F 100 INTRACOASTAL PLACE #408 TEQUESTA FL 33469	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WALLISH, RUTH ANN 9663 SE GLEASON STREET HOBE SOUND FL 33455	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT BLAKE, ROBERT 120 WINTER CLUB COURT WEST PALM BEACH FL 33410	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Banks Clark 9256 SE Venus St. Hobe sound FL 33455	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD Ann Clark 9256 SE Venus St. Hobe Sound, FL 33455	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E037 (10/00)

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:

Herbert B. Barlow
Herbert B. Barlow

3/5/01

(561) 546 501