


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

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90141 018 ****61.25

DOCUMENT # 750673

1. Entity Name
FIFTY-THIRD AVENUE CHURCH OF CHRIST, INC.



Principal Place of Business Mailing Address
3412 53RD AVE E **3412 53RD AVE E**
BRADENTON FL 34203 **BRADENTON FL 34203**

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 **59-1984751** 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

WALLACE, JAMES M.
420 12TH ST W.
BRADENTON FL 33505

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

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	VD <input type="checkbox"/> Delete
NAME	HARVEY, STEVE
STREET ADDRESS	4400 LOST FORREST RD
CITY-ST-ZIP	SARASOTA FL 34235
TITLE	PD <input type="checkbox"/> Delete
NAME	JONES, CHARLES F
STREET ADDRESS	4736 LONGLEAF LANE
CITY-ST-ZIP	SARASOTA FL
TITLE	T <input type="checkbox"/> Delete
NAME	SHIRLEY, CHRISTINE
STREET ADDRESS	13502 2ND AVE EAST
CITY-ST-ZIP	BRADENTON FL 34212
TITLE	D <input type="checkbox"/> Delete
NAME	BARNETT, MARK
STREET ADDRESS	11879 HOLLYHOCK DRIVE
CITY-ST-ZIP	BRADENTON FL 34202
TITLE	SD <input type="checkbox"/> Delete
NAME	MICHAELSON, JAMES
STREET ADDRESS	4430 ADDISON PLACE
CITY-ST-ZIP	SARASOTA FL 34241
TITLE	D <input type="checkbox"/> Delete
NAME	HUBBARD, LARRY
STREET ADDRESS	3514 NEWPORT AVE WEST
CITY-ST-ZIP	BRADENTON FL 34205

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 *James Michaelson* **REQUIRE** 1/13/03 944-924-4220

CR2E037 (10/02)