

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 751689

1. Entity Name

INTERNATIONAL CHURCH OF THE GOLDEN KEYS INC.

Principal Place of Business

10611 BAYSHORE RD.  
NORTH FORT MYERS FL 33917

Mailing Address

10611 BAYSHORE RD.  
NORTH FORT MYERS FL 33917-3805

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

59-1997282

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HALE, NORMAN F  
10611 BAYSHORE RD.  
N FT MYERS FL 33917

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME HALE, NORMAN F.  
STREET ADDRESS 10611 BAYSHORE RD.  
CITY-ST-ZIP N FT MYERS FL 33917 ☐ Delete

TITLE PD  
NAME ROGER HALE  
STREET ADDRESS 10611 BAYSHORE RD  
CITY-ST-ZIP N. FT. MYERS FL 33917 ☒ Change ☐ Addition

TITLE STD  
NAME HALE, JANET L.  
STREET ADDRESS 10611 BAYSHORE RD.  
CITY-ST-ZIP N FT MYERS FL 33917 ☒ Delete

TITLE STD  
NAME NORMAN HALE  
STREET ADDRESS 10611 BAYSHORE RD.  
CITY-ST-ZIP N. FT. MYERS FL 33917 ☒ Change ☐ Addition

TITLE VD  
NAME HALE, ROGER S.  
STREET ADDRESS 10611 BAYSHORE RD.  
CITY-ST-ZIP N. FT. MYERS FL 33917 ☐ Delete

TITLE SD  
NAME BETTY NELSON  
STREET ADDRESS 10611 BAYSHORE RD  
CITY-ST-ZIP N. FT. MYERS FL 33917 ☒ Change ☐ Addition

TITLE ASTD  
NAME NELSON, ELIZABETH A  
STREET ADDRESS 10611 BAYSHORE RD  
CITY-ST-ZIP N FT MYERS FL ☐ Delete

TITLE SD  
NAME CAROLYN BASHAM  
STREET ADDRESS RR1 LARRY'S RIVER  
CITY-ST-ZIP NOVA SCOTIA, CANADA BOH 1TO ☐ Change ☒ Addition

TITLE D  
NAME CLAUS, GORDON,  
STREET ADDRESS 4291 WOODBRIER DR.  
CITY-ST-ZIP FT. MYERS FL ☒ Delete

TITLE D  
NAME HELEN CLAUSS  
STREET ADDRESS 4291 WOODBRIER DR. FT MYERS FL ☐ Change ☐ Addition

TITLE D  
NAME CLAUS, HELEN,  
STREET ADDRESS 4291 WOODBRIER DR.  
CITY-ST-ZIP FT. MYERS FL ☐ Delete

TITLE D  
NAME HELEN LUKE  
STREET ADDRESS 1813 HIGH RD  
CITY-ST-ZIP TALLAHASSEE FL. 32303 ☐ Change ☒ Addition

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: *NORMAN HALE* **NORMAN HALE** April 25, 2000 941 543-1077  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED  
May 09, 2000 8:00 am  
Secretary of State

05-09-2000 90081 028 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)