

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

FILED
Mar 17, 2003 8:00 am
Secretary of State

02-27-2003 90161 011 ****61.25

DOCUMENT # 752404

1. Entity Name

HIGHEST PRAISE FAMILY CHURCH, INC.



Principal Place of Business

1350 E. LAKE ROAD. N.
TARPON SPRINGS FL 34689

Mailing Address

1350 E. LAKE ROAD. N.
TARPON SPRINGS FL 34689

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2002993**

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

Name

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

City

FL

Zip Code

~~RUGGLES, THOMAS W.~~
~~8005 US HWY 10 NO.~~
~~CLEARWATER FL 34621~~

Roy K. Pippin
1350 E. LAKE Rd. N.
TARPON SPRINGS

34688

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

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

1-20-03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	FINCH, THEODORE	
STREET ADDRESS	1350 E LAKE ROAD	
CITY-ST-ZIP	TARPON SPRINGS FL 34689	
TITLE	PCD	<input type="checkbox"/> Delete
NAME	PRESTI, JOHN	
STREET ADDRESS	3991 SWEEPSTAKE COURT -SUITE 2003	
CITY-ST-ZIP	PALM HARBOR FL 34684	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	PRESTI, TAMBER	
STREET ADDRESS	3791 SWEEPSTAKE COURT-SUITE 2003	
CITY-ST-ZIP	PALM HARBOR FL 34684	
TITLE	VD	<input type="checkbox"/> Delete
NAME	FELTMAN, LARRY SR.	
STREET ADDRESS	1218 E. BOYER STREET	
CITY-ST-ZIP	TARPON SPRINGS FL 34689	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Roy K. Pippin	
STREET ADDRESS	1350 E. LAKE Rd. N.	
CITY-ST-ZIP	TARPON SPRINGS FL. 34688	
TITLE	VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHN PRESTI	
STREET ADDRESS	2612 SUMMIT ST	
CITY-ST-ZIP	PALM HARBOR, FL. 34683	
TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NORBERTO RAMOS	
STREET ADDRESS	2724 FOX BOAR CT.	
CITY-ST-ZIP	NEW PORT RICHEY FL. 34655	
TITLE	TREASURER	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LARRY FELTMAN	
STREET ADDRESS	1218 E BOYER ST	
CITY-ST-ZIP	TARPON SPRINGS, FL. 34689	
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:

[Signature] **Signature Required**

1-20-03

227-974-0058

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)