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Jul 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Matham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **753386** (2)

1. Corporation Name

UNITY CHURCH OF PEACE, INC.

Principal Place of Business

Mailing Address

**UNITY CHURCH OF PEACE
1250 RUTLEDGE
NORTH PORT FL 33948
US**

**UNITY CHURCH OF PEACE
PO BOX 2489
PT CHARLOTTE FL 33949
US**



3. Date Incorporated or Qualified

07/17/1980

4. FEI Number

59-2184154

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

**PARNELL, ANGIE, REV.
22519 ASTOR AVE
PORT CHARLOTTE FL 33980**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DT** ☐ DELETE

NAME **MOAD-STANZIONE, PHYLLIS**
STREET ADDRESS **1662 NUREMBERG BLVD**
CITY-ST-ZIP **PORT CHARLOTTE FL**

TITLE **DP** ☐ DELETE

NAME **HOOD, MARION**
STREET ADDRESS **13483 ROMFORD AVE**
CITY-ST-ZIP **PT CHARLOTTE FL**

TITLE **DS** ☐ DELETE

NAME **BRADLEY, ALICE**
STREET ADDRESS **21029 ALPINE**
CITY-ST-ZIP **PORT CHARLOTTE FL**

TITLE **DVP** ☒ DELETE

NAME **STRAPP, ARLENE**
STREET ADDRESS **2056 MAZATIAN RD**
CITY-ST-ZIP **PUNTA GORDA FL**

TITLE **D** ☒ DELETE

NAME **BROCK, JAMES**
STREET ADDRESS **482 READING ST**
CITY-ST-ZIP **PT CHARLOTTE FL**

TITLE **D** ☐ DELETE

NAME **REYNOLDS, RICHARD**
STREET ADDRESS **20249 PEACHLAND BLVD**
CITY-ST-ZIP **PT CHARLOTTE FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

D CAROL Anderson
21330 Glendale Ave. NW
Port Charlotte, FL 33952

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

DVP Philip Kelley
20198 Lorenzo Ave.
Port Charlotte, FL 33952

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

[Signature]

4/30/98 1941 127-1342

CR2E037 (10/97)