## **2000 UNIFORM BUSINESS REPORT (UBR)**

## **FILED** DOCUMENT # **756526** Mar 13, 2000 8:00 am 1. Entity Name **Secretary of State** JUPITER FARMS COMMUNITY CHURCH, INC. 03-13-2000 90018 036 \*\*\*\*70.00 Principal Place of Business Mailing Address 12600 W INDIANTOWN RD 12600 W INDIANTOWN RD JUPITER FL 33478-4678 JUPITER FL 33478-1678 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For 59-2470029 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 33478-4678 Fee Required 6. Name and Address of Current Registered Agent-7. Name and Address of New Registered Agent Name SAME) Street Address (P.O. Box Number is Not Acceptable) DR CLIFFORD M DONALDSON 18221 N 125TH AVE JUPITER FL 33458 SEPT COMMON Zip Code City UNITED TO A 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. 3-1-2000 SIGNATURE Signature, typed or printed na 9. Election Campaign Financing Make Check Payable to FILE NOW: . \$5.00 May Be $\Box$ Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Addition TD Delete Change TITLE TITLE DOROTHY HADAD NAME KATHY COLMAUGH NAME 16873 131St WAY N STREET ADDRESS STREET ADDRESS 5966 LOXAHATCHEE PINES RD JUPITER, FL 33478 CITY-ST-ZIP CITY-ST-ZiP JUPITER, FL 00000 ☐ Delete TITLE D Change **X**Addition JIM TEEL DONALDSON, CLIFFORD NAME 16823 127 DCN STREET ADDRESS STREET ADDRESS 12600 W. INDIANTOWN RD. Jupiter . FL 33478 CITY-ST-ZIP CITY-ST-ZIP Jupiter FL TITLE Delete TITLE Change ☐ Addition NAME SPITZER, BOB STREET ADDRESS STREET ADDRESS 13018 N. 157TH CT CITY-ST-ZIP CITY-ST-ZIP Jupiter FL 33478 ☐ Addition ☐ Delete TITLE Change TITLE MURPHY, DENISE NAME NAME STREET ADDRESS STREET ADDRESS 10827 153RD CT CITY-ST-ZIP CITY-ST-7IP Jupiter, FL 33478 Change ☐ Addition 🔀 Delete TITLE TITLE TAYLOR, PATRICK NAME NAME STREET ADDRESS STREET ADDRESS 16329 ALEXANDER RUN CITY-ST-ZIP CITY-ST-71P JUPITER FL 33478 ☐ Addition □ Delete ☐ Change TITLE DD) F HAYTON, BOB NAME NAME STREET ADDRESS STREET ADDRESS 17971 MGLLEN LANE CITY-ST-ZIP CITY-ST-7IP JUPITER FL 33478 12. I hereby certify that the information supplied with this filling 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

SIGNATURE: SIGNATURE: SIGNATURE NAME OF SIGNING OFFICER OR DIRECTOR Date Description Description of Description De

changed, or on an attachment with an address, with all other like empowered