

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 758833

1. Entity Name

GULF COAST CHRISTIAN SCHOOL, INC.

2

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90004 013 ****61.25

Principal Place of Business

6355 38TH AVENUE NORTH
ST PETERSBURG FL 33710
US

Mailing Address

6355 38TH AVENUE NORTH
ST PETERSBURG FL 33710
US

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

59-2188779

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

ALSUP, WILLIAM M
6340 40TH AVE N
ST PETERSBURG FL 33709

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
After September 13, 2000 min. will be \$236.25

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 VPD ☐ Delete
NAME SMOCK, LINDA
STREET ADDRESS 9657 LAKE SEMINOLE DR E.
CITY-ST-ZIP SEMINOLE FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPD ☒ Delete
NAME BIRDWELL, ED
STREET ADDRESS 2013 CAROLINA AVE NE
CITY-ST-ZIP ST. PETERSBURG FL

TITLE ☐ Change ☒ Addition
NAME VPD
STREET ADDRESS Hittm, Hank
CITY-ST-ZIP 1305-51st AVE NE
ST Petersburg FL 33703

TITLE PD ☐ Delete
NAME STEINER, MARK
STREET ADDRESS 5819 BAYOU GRANDE BLVD NE
CITY-ST-ZIP ST. PETERSBURG FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☒ Delete
NAME THACKREY, DEBBIE
STREET ADDRESS 1118 47TH AVE N
CITY-ST-ZIP ST PETERSBURG FL 33703

TITLE ☐ Change ☒ Addition
NAME SD
STREET ADDRESS Rubens, Barb
CITY-ST-ZIP 3592 55 St N
St Petersburg FL 33710

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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: *William M. Alsup*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/17/00 727-345-3448
Date Daytime Phone #

CR2E037 (5/00)