

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 766717

1. Entity Name

KOINONIA - 33570, INC.

**FILED**  
**Jan 12, 2000 8:00 am**  
**Secretary of State**

01-12-2000 90055 014 \*\*\*\*61.25

Principal Place of Business

Mailing Address

802 4TH ST., S.W.  
RUSKIN FL 33570  
US

1505 GULF CITY RD  
RUSKIN FL 33570-2774

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2259018

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BROWN, TOM FAIRFIELD  
1511 SUN CITY CENTER PLAZA  
SUN CITY CENTER FL 33570

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 DP ☐ Delete  
NAME FOLTS, JEFFREY  
STREET ADDRESS 1505 GULF CITY RD., #9  
CITY-ST-ZIP RUSKIN FL

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

TITLE VD ☐ Delete  
NAME BORDNER, DEBRA  
STREET ADDRESS 5005 BONITA DR.  
CITY-ST-ZIP WIMAUMA FL

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

TITLE STD ☐ Delete  
NAME BUHRKUH, BETTY  
STREET ADDRESS 1505 GULF CITY RD  
CITY-ST-ZIP RUSKIN, FL 00000

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

TITLE D ☐ Delete  
NAME HOUGHTALIN, CINDI L  
STREET ADDRESS 1505 GULF CITY RD LOT 7  
CITY-ST-ZIP RUSKIN FL 33570

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

TITLE D ☐ Delete  
NAME FOLTS, DAWN  
STREET ADDRESS 1505 GULF CITY RD., #9  
CITY-ST-ZIP RUSKIN FL

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

TITLE D ☐ Delete  
NAME BORDNER, BILLY  
STREET ADDRESS 5005 BONITA DR.  
CITY-ST-ZIP WIMAUMA FL

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:

*Betty Buhrkuhl*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-5-2000 813-645-1034

CR2F037 10/00