

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

FILED
Jan 24, 2003 8:00 am
Secretary of State

01-24-2003 90136 042 ****61.25

DOCUMENT # 766717

1. Entity Name
KOINONIA - 33570, INC.



Principal Place of Business

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

Mailing Address

**1505 GULF CITY RD
RUSKIN FL 33570**

2. Principal Place of Business

1505 Gulf City Rd - #1

3. Mailing Address

Same as above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ruskin, FL

City & State

Ruskin, FL

4. FEI Number **59-2259018**

Applied For

Not Applicable

Zip

33570

Country

USA

Zip

33570

Country

USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

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

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

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

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

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
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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: **SIGNATURE REQUIRED**

Jan. 22, 2003 813-645-1034

CR2E037 (10/02)