2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all

ther like empowered.

BERT S. VAN DERREE JAN. 16, 2000 (941) 355-475

Date Dayline Phone *

FILED Jan 25, 2000 8:00 am Secretary of State **DOCUMENT # 771118** 1. Entity Name THE FOUNDATION FOR THE CHURCH OF THE PALMS - PRE 01-25-2000 90079 042 ****61.25 Mailing Address Principal Place of Business 3224 BEE RIDGE ROAD 3224 BEE RIDGE ROAD SARASOTA FL 34243 SARASOTA FL 34239-7201 805809 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 59-2434393 Not Aprilli Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SAVARY, JOHNSON S. 240 SO PINEAPPLE AVE SARASOTA FL 34236 Zip Code City 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 医外侧线电影 计线 SIGNATURE Signature, typed or printed name of registered agent and title if applicable in the control of t (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. ☐ Channe TITLE ☐ Delete TITLE NAME NAME DUDASH, DONNA STREET ADDRESS STREET ADDRESS 5672 ST LOUIS AVE. CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34233 TITLE ☐ Delete TITLE ☐ Change NAME vanderzee, robert NAME STREET ADDRESS STREET ADDRESS 7913 BROADMOOR PINES BLVD CITY-ST-ZIP™ CITY-ST-ZIP SARASOTA FL □ · · · · TITLE DS ----☐ Delete ☐ Change NAME GOODWILL, JAY NAME STREET ADDRESS STREET ADDRESS 1768 OAK LAKES DRIVE CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL □ Delete TITLE ☐ Change TITLE TRUMPLER, RICHARD NAME NAME STREET ADDRESS STREET ADDRESS 7601 WEEPING WILLOW BLVD CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL **Addition** TITI F **X** Delete TITLE guin mi45 NAME MERRITT, SCOTT NAME 328 ESPINOLA STREET ADDRESS STREET ADDRESS 4711 MEADOWVIEW CIRCLE CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL SANDHAGEN, RAY L. Addition TITLE TITLE Delete SANOHAGEN, RAY L NAME NAME STREET ADDRESS 7741 RED CEDAR LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP SARASOTA FL 34241 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