

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 858298

1. Entity Name

LIFE INTERNATIONAL CHURCH, INC.

Principal Place of Business

11735 PLANTATION ROAD  
FORT MYERS FL 33912  
US

Mailing Address

PO BOX 07459  
FORT MYERS FL 33919

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

BEATRICE A BASANSKY  
11735 PLANTATION ROAD  
FT MYERS FL 33912

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.

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

TITLE P  
NAME BASANSKY, WILLIAM  
STREET ADDRESS 11735 PLANTATION RD.  
CITY-ST-ZIP FORT MYERS FL 33912 ☐ Delete

TITLE VPD  
NAME BASANSKY, JERRY T  
STREET ADDRESS 2901 KIPLING AVENUE, STE. 604  
CITY-ST-ZIP ETOBICOKE, ONTARIO CANADA M9V -E5E ☐ Delete

TITLE VPD  
NAME BASANSKY, WM. ERIC  
STREET ADDRESS 6839 CARMELLE DRIVE  
CITY-ST-ZIP FORT MYERS FL 33919-6915 ☐ Delete

TITLE STD  
NAME BASANSKY, BEATRICE A  
STREET ADDRESS 11735 PLANTATION ROAD  
CITY-ST-ZIP FORT MYERS FL 33912 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

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

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

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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BEATRICE A. BASANSKY JAN 03, 01 941-931-5940

FILED  
Jan 27, 2001 8:00 am  
Secretary of State

01-27-2001 90081 010 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number 73-1162294 ☐ Applied For ☐ Not Applicable

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

CR2E037 (10/00)