

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 18, 2001 8:00 am**  
**Secretary of State**

03-01-2001 91323 029 \*\*\*\*61.25

DOCUMENT # N00000000316

1. Entity Name

SIGNS AND WONDERS CHRISTIAN CHURCH, INC.

Principal Place of Business

1232 PALMETTO ROAD  
 EUSTIS FL 32726

Mailing Address

1232 PALMETTO ROAD  
 EUSTIS FL 32726

76454

2. Principal Place of Business

3. Mailing Address

PO BOX 216

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

EUSTIS FL

4. FEI Number

59-3617411

Applied For

Not Applicable

Zip

Country

Zip

Country

32727-0000

USA

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

STOREY, STEPHEN K  
 1232 PALMETTO ROAD  
 EUSTIS FL 32726

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	<input type="checkbox"/> Delete
NAME	STOREY, STEPHEN K	
STREET ADDRESS	1232 Palmetto Rd	
CITY-ST-ZIP	EUSTIS FL 32726	
TITLE	VP	<input type="checkbox"/> Delete
NAME	DUKE, WAYNE	
STREET ADDRESS	39519 Golden Wren Dr.	
CITY-ST-ZIP	UMATILLA FL 32784	
TITLE	S	<input type="checkbox"/> Delete
NAME	BYRNE, ICNA	
STREET ADDRESS	703 Kennison Ct.	
CITY-ST-ZIP	EUSTIS FL 32726	
TITLE	M	<input checked="" type="checkbox"/> Delete
NAME	KIRBY, PHILLIP	(Resigned)
STREET ADDRESS	3325 E. Lake Turner Dr.	
CITY-ST-ZIP	EUSTIS FL 32726-7209	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

STEPHEN K STOREY

STEPHEN K STOREY

Date

Daytime Phone #

CR2E037 (10/00)