

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2002 8:00 am
Secretary of State

0066394

DOCUMENT # N00000000316

1. Entity Name

SIGNS AND WONDERS CHRISTIAN CHURCH, INC.

04-07-2002 90574 002 ****70.00

Principal Place of Business
1232 PALMETTO ROAD
EUSTIS FL 32726

Mailing Address
P.O. BOX 216
EUSTIS FL 32727

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-3617411

Applied For
 Not Applicable

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
 NAME **STOREY, STEPHEN K**
 STREET ADDRESS **1232 PALMETTO RD**
 CITY-ST-ZIP **EUSTIS FL 32726**

TITLE **VPT** ☐ Change ☒ Addition
 NAME **KOEMAN, TERRANCE**
 STREET ADDRESS **4301 North Hwy 19A LOT 270**
 CITY-ST-ZIP **MT DORA FL 32757-2030**

TITLE **VPT** ☒ Delete
 NAME **DUKE, WAYNE**
 STREET ADDRESS **39519 GOLDEN GEM D**
 CITY-ST-ZIP **UMATILLA FL 32784**

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

TITLE **ST** ☐ Delete
 NAME **BYRNE, IONA**
 STREET ADDRESS **703 KENMOON CT**
 CITY-ST-ZIP **EUSTIS FL 32726**

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

TITLE **MT** ☒ Delete
 NAME **KIRBY, PHILLIP**
 STREET ADDRESS **3325 E LAKE JOANNE DR**
 CITY-ST-ZIP **EUSTIS FL 32736-7209**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 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: *Stephen K Storey* **STEPHEN K. STOREY** 3-29-02 (352) 483-2921
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date / Daytime Phone #

CR2E037 (9/01)