

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2001 8:00 am
Secretary of State

04-09-2001 90054 017 ****61.25

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DOCUMENT # N00000000450

LX

1. Entity Name

ALL SAINTS PARISH INC.

Principal Place of Business

PO BOX 3247
 10062 MAYGOLD LANE
 SPRINGHILL FL 34611

Mailing Address

PO BOX 3247
 10062 MAYGOLD LANE
 SPRINGHILL FL 34611

76931



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

593620835

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

NOBLE, JAMES
11291 COUNTRYWOOD CT
SPRING HILL FL 34609

Name **EDWARD D LEITSCH**

Street Address (P.O. Box Number is Not Acceptable)

9100 TARLETON Cir.

City **WEEKI WACHEE**

FL

Zip Code **34613**

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

EDWARD D LEITSCH

Edward D Leitsch

7-14-01

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

After September 12, 2001, min. will be \$236.25

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 **PRESIDENT** Delete **D**
 NAME **EDWARD D LEITSCH**
 STREET ADDRESS **9100 TARLETON Cir**
 CITY-ST-ZIP **WEEKI WACHEE FL 34613**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VICE PRESIDENT** Delete **D**
 NAME **WILLIAM E THOMAS**
 STREET ADDRESS **1783 STUDENT AVE ST.**
 CITY-ST-ZIP **SPRINGHILL FL 34609**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **SECRETARY** Delete **D**
 NAME **BARBARA A METZ**
 STREET ADDRESS **1362 WATER FALL DR**
 CITY-ST-ZIP **SPRINGHILL FL 34609**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **TREASURER** Delete **D**
 NAME **MIRIAM BARTLETT**
 STREET ADDRESS **1050 ABBOTT AVE**
 CITY-ST-ZIP **SPRINGHILL, FL 34609**

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: **EDWARD D LEITSCH** *Edward D Leitsch* **7-14-01 352-596-1865**

CR2E037 (5/01)

Attachment

Doc# N00000000450
76931

All Saints Parish Inc
July 14th 2001

To whom it may concern,

Enclosed is the second filing of the UBR for our corporation. The Original was sent in April and apparently returned for correction. For some reason the returned document was never received.

We just found out about this and we are submitting this second filing hoping it be satisfactory.

Sincerely
Edward J. Gutsch (President)