

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000007100

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: FRIENDS OF CHRIST CHURCH, INC.

Current Principal Place of Business:

375 QUAIL TRAIL
MONTICELLO, FL 32344

New Principal Place of Business:

Current Mailing Address:

375 QUAIL TRAIL
MONTICELLO, FL 32344

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEINBACK, BRUCE A
385 N. JEFFERSON ST.
MONTICELLO, FL 32344 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DOS () Delete
Name: CANTRELL, MARSHA
Address: 7748 BASS RIDGE TRAIL
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: LEINBACK, BRUCE
Address: 385 N. JEFFERSON ST.
City-St-Zip: MONTICELLO, FL 32344

Title: D () Delete
Name: WRIGHT, GARY
Address: 200 E WASHINGTON ST.
City-St-Zip: MONTICELLO, FL 32344

Title: PD () Delete
Name: VOGELGESANG, DENISE
Address: 875 QUAIL TRAIL
City-St-Zip: MONTICELLO, FL 32344

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENISE VOGELGESANG

PD

05/01/2002

Electronic Signature of Signing Officer or Director

Date