

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

04-01-2002 90679 001 ***122.50

0076423

DOCUMENT # N01000000085

1. Entity Name

THE CHURCH IN THE FARMS, INC.

Principal Place of Business

Mailing Address

**12265 W INDIANTOWN ROAD
 JUPITER FL 33478**

**12265 W INDIANTOWN ROAD
 JUPITER FL 33478**

2. Principal Place of Business

13475 W. INDIANTOWN RD

3. Mailing Address

13475 W. INDIANTOWN RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

JUPITER FL

City & State

JUPITER FL

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

33478

Zip

Country

33478

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**HEWETT, FRED L
 17625 126 TERR
 JUPITER FL 33478**

7. Name and Address of New Registered Agent

Name

DAVID ALLISON

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

13475 W. INDIANTOWN RD

City

JUPITER

FL

Zip Code

33478

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

DAVID ALLISON TREASURER

3/1/02

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 **PD** ☐ Delete
 NAME **HEWETT, FRED L**
 STREET ADDRESS **17625 126 TERR. NORTH**
 CITY-ST-ZIP **JUPITER FL 33478**

TITLE **VD** ☐ Delete
 NAME **CORNELIUS, WAYNE**
 STREET ADDRESS **15224 105 DRIVE**
 CITY-ST-ZIP **JUPITER FL 33478**

TITLE **STD** ☐ Delete
 NAME **BARNES, DONALD**
 STREET ADDRESS **13393 154 PLACE**
 CITY-ST-ZIP **JUPITER FL 33478**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
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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 another like empowered.

SIGNATURE:

DAVID ALLISON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)