

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0046129

DOCUMENT # N01000001498

1. Entity Name

TERRY L. COLLIER MINISTRY, INC.



FILED

04 MAY 27 AM 10:50

Principal Place of Business

PASADENA PRESBYTERIAN CHURCH
100 PASADENA AVE
SAINT PETERSBURG FL 33710

Mailing Address

PASADENA PRESBYTERIAN CHURCH
100 PASADENA AVE
SAINT PETERSBURG FL 33710

SECRETARY OF STATE
REINSTATEMENT 03-04



☐ CHECK HERE IF MAKING CHANGES

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 APPLIED FOR

59-3709276

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

J. STANLEY SKIPPER

2007 W. DELEON STREET
SUITE A
TAMPA FL 33606-2081

7. Name and Address of New Registered Agent

Name TERRY L. COLLIER

Street Address (P.O. Box Number is Not Acceptable)
5230 DENVER ST.

City

ST. PETERSBURG FL 33703

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Terry L. Collier PRES. J. Stanley Skipper, STD 01/14/03
PREVIOUS REGISTERED AGENT

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME COLLIER, TERRY L
STREET ADDRESS 5230 DENVER STREET
CITY-ST-ZIP ST. PETERSBURG FL 33703 ☐ Delete

TITLE VD
NAME COLLIER, JUNE L
STREET ADDRESS 5230 DENVER STREET
CITY-ST-ZIP ST. PETERSBURG FL 33703 ☐ Delete

TITLE SD
NAME J. STANLEY SKIPPER
STREET ADDRESS 2007 W. DELEON STREET #A
CITY-ST-ZIP TAMPA FL 33606-2081 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE
NAME 200038426952
STREET ADDRESS 06/29/04--01064--006 **297.50
CITY-ST-ZIP ☐ Change ☐ Addition

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

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

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

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

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:

TERRY L. COLLIER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/20/04 727-463-6181
Date Daytime Phone #

CR2E037 (10/02)