FILED

1/11/01

352-867-5395

## **2001 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment with an address, with all other like empowered

## Jan 29, 2001 8:00 am Secretary of State DOCUMENT # NO1017 1. Entity Name ASCENSION LUTHERAN CHURCH OF OCALA, FLORIDA, INC 01-29-2001 90156 039 \*\*\*\*61.25 Principal Place of Business Mailing Address 5730 SE 28TH STREET 5730 SE 28TH STREET OCALA FL 34471-6429 OCALA FL 33471-6429 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3163860 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent - -7. Name and Address of New Registered Agent Name LEANDER **EZOLA, LEANDER** 5730 S.E. 28TH ST. OCALA FL 34471 OCALA 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 Conder Do SIGNATURE FILE NOW: 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution. Added to Fees FEE IS \$61.25 Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. VPD TITLE Delete TITLE ☐ Change Addition FUNK, LEE NOTH OT CHESMORE, JOHN NAME NAME 1769 SE 57 CT STREET ADDRESS STREET ADDRESS OCALA, FL 34471 CITY-ST-ZIP **OCALA FL 34471** CITY-ST-ZIP FS TITLE TITLE Addition ✓ Delete ☐ Change ADXINSON PHYLLIS BRADLEY, BONNIE NAME MARKE 20 CHERRY LN. STREET ADDRESS 33 BANYAN COURSE STREET ADDRESS OCALA FL, 34472 CITY-ST-ZIP **OCALA FL 34472** CITY-ST-7IP TITLE Delete TITLE ☐ Change Addition RHODENBAUGH, JO VELL NAME NAME UNIT 205, 1701 SE 248 RD STREET ADORESS STREET ADDRESS CITY-ST-7IP **OCALA FL 34471** CITY-ST-7IP TITLE ☐ Delete TITLE 52 Change ☐ Addition KURTZ, JAME 1606 SE 135THST KURTZ, JANE NAME NAME 7606 SE 135TH ST STREET ADDRESS STREET ADDRESS SUMMERFIELD, FL 34491 CITY-ST-ZIP SUMMER FIELD FL 34491 CITY-ST-ZIP TITLE Delete Change ☐ Addition LEWIS, MARILIN LEWIS, MARILYN NAME NAME EMERGE RUN **5 EMERALD RUN** STREET ADDRESS STREET ADDRESS OCALA, PL 34472 CITY-ST-ZIP OCALA FL 34472 CITY-ST-ZIP Delete T.D. HARPLE, KENNEY H TITLE TITLE ☐ Change **Addition** THORICHT, BARBARA NAME NAME 3921 SE 26TH CT ED STREET ADDRESS 12703 SE 60 CT STREET ADDRESS OLALA, FL 34480 CITY-ST-ZIP CITY-ST-ZIP BELLEVIEW FL 34420 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