2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 29, 2000 8:00 am
Secretary of State
02-29-2000 90181 018 ****61.25

DOCUMENT # N01197

1. Entity Name

GEORGE YOUNG MEMORIAL UNITED METHODIST CHURCH, I

Principal Place of Business	Mailing Address
2801 E. LAKE RD. PALM HARBOR FL 34685-8819	2801 E. LAKE RD. PALM HARBOR FL 34685-1613

D0025783

DO NOT WRITE IN THIS SPACE

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 59-2276646 ☐ 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
FREE, E. LEBRON PARK PROFESSIONAL CENTER 2725 PARK DRIVE, SUITE 4 CLEARWATER FL 34623-8023	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T AGASE, ALEX 1281 PINE RIDGE CIRCLE E APT C2 TARPON SPRINGS FL 34685-4009	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Finance Secretary Lew Dunn 1209 Halifax Ct. Tarpon Springs, FL 34689-7617 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PECK, RON 4650 AYLESFORD DR. PALM HARBOR FL 34685-4009	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T David Iverson 4772 Stoneview Circle Oldsmar, FL 34677-4855 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JONES, VIRGINIA 340 CYPRESS CREEK CIR OLDSMAR FL 34677	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T George Mindak 1200 Tarpon Woods Blvd Palm Harbor, FL 34685-2014 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T DURHAM, ELINOR 1400 TARPON WOODS BLVD #H1 PALM HARBOR FL 34685	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Pamela Wilson 1252 Clays Trail Oldsmar, FL 34677-4865 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SCHROCK, CLAIR 3368 PATTIE PLACE PALM HARBOR FL 34685	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Robert Laforme 1910 Riveredge Drive Tarpon Springs, FL 34689 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ANDREWS, DAVID 4116 MORENO DR. PALM HARBOR FL 34684	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T James Glass 16307 Colwood Drive Odessa, FL 33556-2811 — ☐ 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: Ronald M. Peck Ronald M. Peck 2/7/2000 727-784-9250
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #