

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

DOCUMENT # N02000005534

1. Entity Name

REAL LIFE CHRISTIAN FELLOWSHIP, INC.



FILED
Jul 25, 2003 8:00 am
Secretary of State

07-25-2003 90093 008 ****61.25

Principal Place of Business

7200 13TH AVE N
ST PETERSBURG FL 33710

Mailing Address

7200 13TH AVE N
ST PETERSBURG FL 33710

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

02-6634828

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

GRIFFIN, RONALD F
7200 13TH AVE N
ST PETERSBURG FL 33710

7. Name and Address of New Registered Agent

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

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
After September 10, 2003, min will be \$236.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete
NAME **GRIFFIN, SHAYNE C**
STREET ADDRESS **222 84TH AVE N**
CITY-ST-ZIP **ST PETERSBURG FL 33702**

TITLE **T/D** ☒ Change ☐ Addition
NAME **Griffin, SHAYNE C**
STREET ADDRESS **222 84TH AVE N**
CITY-ST-ZIP **ST PETERSBURG FL 33702**

TITLE **D** ☐ Delete
NAME **LEIST, RICHARD**
STREET ADDRESS **5200 28TH ST N**
CITY-ST-ZIP **ST PETERSBURG FL 33714**

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

TITLE **D** ☐ Delete
NAME **GILLIS, TOMMY**
STREET ADDRESS **7126 13TH AVE N**
CITY-ST-ZIP **ST PETERSBURG FL 33710**

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

TITLE **D** ☐ Delete
NAME **LUCKS, ERIC**
STREET ADDRESS **PO BOX 17697**
CITY-ST-ZIP **CLEARWATER FL 33762**

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

TITLE **P** ☐ Delete
NAME **GRIFFIN, RONALD F**
STREET ADDRESS **7200 13TH AVE N**
CITY-ST-ZIP **ST PETERSBURG FL 33710**

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

TITLE **V** ☐ Delete
NAME **GRIFFIN, LINDA L**
STREET ADDRESS **7200 13TH AVE N**
CITY-ST-ZIP **ST PETERSBURG FL 33710**

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 all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

7/23/03 (727) 742-7817

CR2E037 (4/03)