

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02365

1. Entity Name

THE LEESBURG DISTRICT BOARD OF MISSIONS AND CHUR

FILED
Apr 06, 2001 8:00 am
Secretary of State

04-06-2001 90028 050 ****61.25

000227

Principal Place of Business

Mailing Address

~~901 W MAIN STR~~
LEESBURG FL 34748
US

~~C/O J. STEPHEN PULLUM~~
~~1330 W CITIZENS BLVD STE 701~~
~~LEESBURG FL 34748~~
US

00032153



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

103 North Lee Street

3. Mailing Address

103 North Lee Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Leesburg, FL

City & State

Leesburg, FL

4. FEI Number

59-2307314

Applied For

Not Applicable

Zip

34748

Country

Lake

Zip

34748

Country

Lake

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

PULLUM, STEPHEN
1330 W. CITIZENS BLVD., STE. 701
LEESBURG FL 34748

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 D ☐ Delete
NAME ZIPPERER, DOUGLAS H
STREET ADDRESS ~~901 W MAIN STR~~
CITY-ST-ZIP LEESBURG FL

TITLE ☒ Change ☐ Addition
NAME 103 N. Lee St.
STREET ADDRESS 34748
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME WAGNER, CLARON D.
STREET ADDRESS ~~901 W MAIN STR~~
CITY-ST-ZIP LEESBURG FL

TITLE ☒ Change ☐ Addition
NAME 103 N. Lee St.
STREET ADDRESS 34748
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME KOKX, DOUGLAS S
STREET ADDRESS ~~901 W MAIN STR~~
CITY-ST-ZIP LEESBURG FL

TITLE ☒ Change ☐ Addition
NAME 103 N. Lee St.
STREET ADDRESS 34748
CITY-ST-ZIP

TITLE DAS ☐ Delete
NAME PULLUM, J. STEPHEN
STREET ADDRESS 1330 W. CITIZENS BLVD
CITY-ST-ZIP LEESBURG FL

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

TITLE D ☒ Delete
NAME WILKINS, MAX
STREET ADDRESS 901 W. MAIN ST
CITY-ST-ZIP LEESBURG FL

TITLE ☐ Change ☒ Addition
NAME CD
NAME Harry H. Holloman
STREET ADDRESS 103 N. Lee St.
CITY-ST-ZIP Leesburg, FL 34748

TITLE S ☐ Delete
NAME CORBIN, IVAN
STREET ADDRESS ~~901 W MAIN ST~~
CITY-ST-ZIP LEESBURG FL

TITLE ☒ Change ☐ Addition
NAME 103 N. Lee St.
STREET ADDRESS 34748
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

4/3/01

352-787-1643

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)