## 2002 UNIFORM BUSINESS REPORT (UBR)

## Mar 24, 2002 8:00 am § Secretary of State **DOCUMENT # N08073** 1. Entity Name 03-24-2002 90066 050 \*\*\*\*61.25 JUPITERFIRST CHURCH, INC. Principal Place of Business Mailing Address 1475 INDIAN CREEK PKWY, (33458) 1475 INDIAN CREEK PKWY, (33458) JUPITER FL 33458 JUPITER FL 33458 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #. etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2500182 Not Applicable Zip \_ Country \$8.75 Additional 5. Certificate of Status Desired — 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) JOHNSON, BARRY L DR. 1475 INDIAN CREEK PARKWAY JUPITER FL 33478 Zip Code City 8. The above named entity for the purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE ed agent and title if applicable 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Addition TITLE ☐ Change TITLE D ☐ Delete NAME NAME JOHNSON, BARRY L STREET ADDRESS STREET ADDRESS 5900 RIVER ISLE DR CITY-ST-ZIP CITY-ST-ZIP JUPITER FL 33458 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME KAISER-CROSS, DAVID STREET ADDRESS STREET ADDRESS .10326.N\_158TH\_ST\_ CITY-ST-ZIP CITY-ST-ZIP JUPITER FL 33478 Change TITLE ☐ Delete ☐ Addition NAME HATFIELD, LYNN STREET ADDRESS STREET ADDRESS **56 MAPLECREST CIR** CITY-ST-ZIP CITY-ST-ZIP JUPITER FL 33458 TITLE TITLE ☐ Delete ☐ Addition THISTLE, CARL NAME STREET ADDRESS 260 BRIAR CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>Jupiter FL 33458</u> Delete Addition TITLE TITLE Jill Saracino Drive NAME NAME FRIANT, CHARLES

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 eath; 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 ac

STREET ADDRESS

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TITLE

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SIGNATURE:

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TITLE

NAME

132 INTRACOASTAL CIRCLE

TEQUESTA FL 33469

☐ Delete

☐ Change

☐ Addition

FILED

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