

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N12549

FILED
Feb 01, 2002 8:00 AM
Secretary of State

Entity Name: THE CHURCH OF ST LUKE & ST PETER, INC.

Current Principal Place of Business:

2745 CANOE CREEK RD
P O BOX 701056
ST. CLOUD, FL 34770

New Principal Place of Business:

2745 CANOE CREEK RD
ST. CLOUD, FL 34772

Current Mailing Address:

2745 CANOE CREEK RD
P O BOX 701056
ST. CLOUD, FL 34770

New Mailing Address:

2745 CANOE CREEK RD
ST. CLOUD, FL 34772

FEI Number: 59-2097806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RYAN, JAMES D
108 AVOCADO STREET
SAINT CLOUD, FL 34769 US

Name and Address of New Registered Agent:

CAMPBELL, BRIAN G THE REV
122 WESTMORELAND CR.
KISSIMMEE, FL 34744 US

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: BRIAN G. CAMPBELL

02/01/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RYAN, JAMES D
Address: 708 AVOCADO STREET
City-St-Zip: SAINT CLOUD, FL 34769

Title: D () Delete
Name: CIAVARELLA, MELISSA
Address: 4618 PINE LAKE DRIVE
City-St-Zip: SAINT CLOUD, FL 34769

Title: TD () Delete
Name: ROGERS, LILA
Address: 2106 OAKVIEW CIRCLE
City-St-Zip: ST. CLOUD, FL

Title: D () Delete
Name: BALLANTINE, JEFF
Address: 5103 ROCKABY ROAD
City-St-Zip: SAINT CLOUD, FL 34772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAMPBELL, BRIAN G THE REV
Address: 122 WESTMORELAND CR.
City-St-Zip: KISSIMMEE, FL 34744

Title: D (X) Change () Addition
Name: RYAN, JAMES D
Address: 708 AVOCADO
City-St-Zip: SAINT CLOUD, FL 34769

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN G. CAMPBELL

PD

02/01/2002

Electronic Signature of Signing Officer or Director

Date