

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N12827

1. Entity Name

ST. MATTHEWS ANGLICAN CHURCH, INC.

FILED
Mar 01, 2000 8:00 am
Secretary of State

03-01-2000 90017 009 ****70.00

Principal Place of Business

10701 BLOOMINGDALE AVE
RIVERVIEW FL 33569

Mailing Address

P.O. BOX 1173
RIVERVIEW FL 33568-1173

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2621459

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

E.J. MCMULLEN
4902 BAYSHORE BLVD. #514
TAMPA FL 33611

← Deceased
passed away in
June of 1999

7. Name and Address of New Registered Agent

Name Rev. William H. Perkins, Jr.

Street Address (P.O. Box Number is Not Acceptable)

11307 Yeager Ct

City River View, FL

Zip Code 33569

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

Rev. William H. Perkins, Jr. (Deceased) Pres.
Not able to sign Deceased

2-15-2000

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

TITLE	VD	<input type="checkbox"/> Delete
NAME	CONNELLY, DANIEL N	
STREET ADDRESS	3810 BUCK TAIL LANE	
CITY-ST-ZIP	LITHIA FL 33547	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MAHONEY, JAMES R.	
STREET ADDRESS	12401 M. 22ND ST #A110	
CITY-ST-ZIP	TAMPA FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	KLEINOTAS, ALLEN J	
STREET ADDRESS	3612 GREENSTONE LANE	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	D	<input type="checkbox"/> Delete
NAME	MC KAY, THOMAS W II	
STREET ADDRESS	809 TUSCANY ST	
CITY-ST-ZIP	BRANDON FL 33511	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	MCMULLEN, EDMUND J.	
STREET ADDRESS	4902 BAYSHORE BLVD #514	
CITY-ST-ZIP	TAMPA FL	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	SIMMONS, ROBERT	
STREET ADDRESS	951 79TH AVE N, #124	
CITY-ST-ZIP	ST PETERSBURG FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Rev. William H. Perkins, Jr.	
STREET ADDRESS	11307 Yeager Ct	
CITY-ST-ZIP	River View, FL 33569	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Laura M. Harris	
STREET ADDRESS	3012 Minuteman Ln.	
CITY-ST-ZIP	Brandon, FL 33511	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Allen J. Kleinotas	
STREET ADDRESS	3612 Greenstone Lane	
CITY-ST-ZIP	Valrico FL 33594	
TITLE	ST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Judy F. McKay	
STREET ADDRESS	809 Tuscanway St.	
CITY-ST-ZIP	Brandon, FL 33511	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: Rev. William H. Perkins, Jr. Pres. 2-15-2000 813-663-0334
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)