

2000 UNIFORM BUSINESS REPORT (UBR)**FILED**
Feb 14, 2000 8:00 am
Secretary of State

02-14-2000 90036 004 ****61.25

011747



DO NOT WRITE IN THIS SPACE

DOCUMENT # N13669

1. Entity Name

FIRST EVANGELICAL COVENANT CHURCH OF WINTER PARK

Principal Place of Business

Mailing Address

**1720 HOWELL BRANCH ROAD
WINTER PARK FL 32789****1720 HOWELL BRANCH ROAD
WINTER PARK FL 32789-1120**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-6343014

Applied For

Not Applicable

Zip

Country

Zip

Country

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

Name

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

City

FL

Zip Code

**LAND, BINFORD
528 LIGHTNING TR
MAITLAND FL 32751**

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	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
VD	SASSARD, GARY	606 BEVERLY AVE	ALTAMONTE SPGS FL 32701	☐
CD	YOUSEF, SHIRLEY	105 LONG BRANCH RD	WINTER PARK FL 32792	☐
S	MCDERMOTT, MONICA	1230 CHEETAH TR	WINTER SPGS FL 32708	☒
T	TURNER, JOHN	2348 TEMPLE DR	WINTER PARK FL	☐
D	CHANTER, THOMAS T.	1168 CLINGING VINE PL	WINTER SPGS FL 32708	☐
S	LAND, BINFORD	528 LIGHTNING TRAIL	MAITLAND FL	☐

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change ☐ Addition
S	Janice Lilly	2106 Cochise Trail	Casselberry, FL 32707	☒ Change ☐ Addition

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:

Thomas E. Chanter

2/7/00

(407)644- 4112

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)