

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N13849

1. Entity Name

THE TRADITIONAL CATHOLIC CHURCHES OF FLORIDA INC

**FILED**  
**Apr 10, 2000 8:00 am**  
**Secretary of State**

04-10-2000 90165 033 \*\*\*\*70.00

Principal Place of Business

Mailing Address

5011 VILLAGE GARDENS DR  
SARASOTA FL 34234  
US

5011 VILLAGE GARDENS DR  
SARASOTA FL 34234-4017  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2869111

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

BUMIENNY, ROBERT J BISHOP  
5011 VILLAGE GARDENS DR  
SARASOTA FL 34234

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 ARSENAULT, WILLIAM L REV,  
STREET ADDRESS 5206 TENTH AVENUE SO.  
CITY-ST-ZIP GULFPORT FL 33707

TITLE ARSENAULT, WILLIAM L, MOST ☒ Change ☐ Addition  
NAME 5959 SOMERSET DRIVE  
STREET ADDRESS PENSACOLA FL 32526  
CITY-ST-ZIP

TITLE PD ☐ Delete  
NAME GUMIENNY, ROBERT J REV. <sup>MOST</sup>  
STREET ADDRESS 5011 VILLAGE GARDENS DR  
CITY-ST-ZIP SARASOTA FL 34234

TITLE ☐ Change ☒ Addition  
NAME FRANCONI CHRISTOPHER MOST <sup>REV.</sup>  
STREET ADDRESS 19 COLD SPRING COURT  
CITY-ST-ZIP PALM COAST FL 32137

TITLE STD ☐ Delete  
NAME PINTZOW, HERMAN  
STREET ADDRESS 3233 LOCKWOOD RIDGE RD #198  
CITY-ST-ZIP SARASOTA FL 34234

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

TITLE D ☒ Delete  
NAME OLNEY, BRENDAN  
STREET ADDRESS 1501 E. 38TH AVE  
CITY-ST-ZIP GARY IN 46409

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

TITLE VD ☐ Delete  
NAME CARDENAS, FRANCESCO A REV.  
STREET ADDRESS 832 FILLMORE ST  
CITY-ST-ZIP GARY IN 46402

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-27-00 941-739-6300

CR2E037 (9/99)