2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Feb 19, 2002 8:00 am **DOCUMENT # N14773** 1. Entity Name Secretary of State ANCHOR CHRISTIAN CHURCH INC. 02-19-2002 90044 046 ****61.25 Principal Place of Business Mailing Address 11651 EAST TERRY STREET 11651 EAST TERRY STREET BONITA SPRINGS FL 33923 BONITA SPRINGS FL 33923 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 59-2571400 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 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) O'HARA, BRIAN 106 CURACAO LANE **BONITA SPRINGS FL 34135** Zip Code 33928 ESTERO 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 ROBERT CLARK 1/20/02 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. (9/01)TITLE Delete TITLE CLARK, ROBERT O'HARA, BRIAN NAME NAME 21701 SUNGATE CT ESTERO, FL - 33928 STREET ADDRESS 106 CURAÇÃO LANE STREET ADDRESS CITY-ST-ZIP **BONITA SPRINGS FL 34135** CITY-ST-ZIP VPD Delete MARTINDALE, MAURICE GREGG, RICHARD 25331 FAIRWAY DUNES 1243 WINDSWEPT AVENUE STREET ADDRESS STREET ADDRESS NAPLES FL 34109 CITY-ST-ZIP TITLE ☐ Delete TITLE Change GUNDER, LYNDON NAME NAME STREET ADDRESS 3501 MUSCADINE LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IF **BONITA SPRINGS FL 34135** Change TITLE 🔼 Delete TITLE Addition JOSEPH WILLIAMS 28418 VERDE LANE BONITA SPRINGS, FL CLARK, ROBERT NAME NAME STREET ADDRESS 21701 SUNGATE CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ESTERO FL 33928 ☐ Detete TITLE TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/F CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

ROBERT CLARK 1/20/02 947-3758

Date Date Dayline Phone *