

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N20571

FILED  
Jan 08, 2002  
Secretary of State

Entity Name: NEW LIFE COMMUNITY CHURCH OF MARCO ISLAND, INC.

## Current Principal Place of Business:

PO BOX 887  
MARCO ISL, FL 34146 US

## New Principal Place of Business:

1361 ANDALUSIA TERRACE  
MARCO ISL, FL 34145 US

## Current Mailing Address:

PO BOX 887  
MARCO ISL, FL 34146 US

## New Mailing Address:

PO BOX 1220  
MARCO ISL, FL 34146 US

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCCULLEY, THOMAS C REV.  
% RHODES & TUCKER, ATTORNEYS  
950 N. COLLIER BLVD  
MARCO ISLAND, FL 34145 US

## Name and Address of New Registered Agent:

MCCULLEY, THOMAS C REV.  
% RHODES & TUCKER, ATTORNEYS  
950 N. COLLIER BLVD  
MARCO ISLAND, FL 34145 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: REV. THOMAS C. MCCULLEY

01/08/2002

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P                      ( ) Delete  
Name: MCCULLEY, THOMAS C REV.  
Address: 1190 EMBER COURT  
City-St-Zip: MARCO ISLAND, FL 34145

Title: T                      ( ) Delete  
Name: FENIMORE, DONALD C  
Address: 651 DIPLOMAT COURT  
City-St-Zip: MARCO ISLAND, FL 34145

Title: V                      ( ) Delete  
Name: TWILLA, FRED  
Address: 183 KIRKWOOD AVENUE  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D                      ( ) Delete  
Name: MURPHY, FRANK  
Address: 1195 TWIN OAK CT  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D                      ( ) Delete  
Name: SIMMONS, ROBERT M.  
Address: 331 EDGEWATER CT  
City-St-Zip: MARCO ISLAND, FL

Title: D                      ( ) Delete  
Name: KIENLEN, THOMAS  
Address: 71 PEACH PALM LANE  
City-St-Zip: NAPLES, FL 34114

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: REV. THOMAS C. MCCULLEY

P

01/08/2002

Electronic Signature of Signing Officer or Director

Date