

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

Page 1 of 2

DOCUMENT # *N 22951*
1. Entity Name *Church of Christ Inc.*
c/o Gilbert Miller
3442 SOUTH STREET
FT. MYERS, FLA. 33916



FILED

03 AUG 21 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1827 Veronica Shoemaker Blvd.
Suite, Apt. #, etc.

3. Mailing Address
c/o 3442 South Street
Suite, Apt. #, etc.

REINSTATEMENT *02-03*
DO NOT WRITE IN THIS SPACE

City & State
FT. MYERS, FLA
Zip
33916
Country
USA

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FT. MYERS, FLA
Zip
33916
Country
USA

4. FEI Number
592518341
Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Gilbert B. MILLER
Street Address (P.O. Box Number is Not Acceptable)
3442 SOUTH STREET
FT. MYERS FLORID *33916*
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Vernon L. Givens* *VERNON L. GIVENS* Trustee
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE *06-06-03*

**FEE IS \$61.25
Initial or Amended UBR**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>NOTE THE NAME OF THIS PERSON LISTED IS TO BE ADDED TO EXISTING LIST. THAT IS ON FILE. THANKS</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Trustee: KENNETH FRAZIER, Sr. 123 BLACKSTONE DRIVE LEHIGH ACRES FLA. 33913</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>100022620451 08/28/03--01003--006 **297.50</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>100022620451 08/28/03--01003--007 **61.25</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE 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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Vernon L. Givens* *VERNON L. GIVENS* TRUSTEE *06-06-03* *238-332-1811*

CR2E037B (12/02)

Title: Director / Minister / Trustee

Name: Gilbert B. Miller
3442 South Street
Ft. Myers, FLA. 33916

Title: Director / Assistant Treasurer / Trustee

Name: NATHANIEL JENKINS
15570 Pine Ridge Road
Ft. Myers FLA 33908

Title: Director / Trustee

Name: HENRY PHILLIPS
2422 DAVIS STREET
Ft. Myers, FLA 33916

Title: Director / Trustee

Name: TERRY W. GASKIN
3976 Coming Court
Ft. Myers, FLA 33905

Title: Director / Assistant Treasurer / Trustee

Name: KENNETH FRAZIER Sr.
123 Blackstone Drive
Lehigh Acres, FLA. 33913

Title: Director / Treasurer / Trustee

Name: VERNON L. GIVENS
4976 Sherry Street
Ft. Myers, FLA 33905

Title: Director / Trustee

Name: Michael Flemming
4636 New York Drive
Ft. Myers, FLA 33905