

# 2000 UNIFORM BUSINESS REPORT (UBR)

4/28

FILED

Jun 23, 2000 8:00 am  
Secretary of State

04-28-2000 90033 032 \*\*\*\*61.25

DOCUMENT # N24079

1. Entity Name

*R*

THE FLORIDA DISTRICT OF THE UNITARIAN UNIVERSAL

Principal Place of Business

Mailing Address

1901 E ROBINSON ST  
STE. 18  
ORLANDO FL 32803  
US

1901 E ROBINSON ST  
STE. 18  
ORLANDO FL 32803-5934  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5. Name and Address of Current Registered Agent

4. FEI Number

50-2888056

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

HIGGINS, MARY C REV  
1901 E ROBINSON ST  
STE. 18  
ORLANDO FL 32803

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 fee 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             | <input type="checkbox"/> Delete            |
|-------|-----------------|--------------------|-------------------------|--------------------------------------------|
| PO    | ORTEUS, ED      | 5341 COBALT CT     | CAPE CORAL FL           | <input type="checkbox"/> Delete            |
| VP    | EVANS, MARGARET | 7326 4TH AVE N     | ST. PETERSBURG FL       | <input checked="" type="checkbox"/> Delete |
| T     | STOWE, WINI     | 8898 10TH ST NORTH | ST. PETERSBURG FL 33702 | <input type="checkbox"/> Delete            |
| S     | KENON, ROBERT   | 4213 PLEASANT DR   | TALLAHASSEE FL 32303    | <input checked="" type="checkbox"/> Delete |
|       |                 |                    |                         | <input type="checkbox"/> Delete            |
|       |                 |                    |                         | <input type="checkbox"/> Delete            |

| TITLE                                                  | NAME             | STREET ADDRESS           | CITY-ST-ZIP                  | <input type="checkbox"/> Change            | <input type="checkbox"/> Addition            |
|--------------------------------------------------------|------------------|--------------------------|------------------------------|--------------------------------------------|----------------------------------------------|
| <input checked="" type="checkbox"/> PRESIDENT/DIRECTOR | ED ORTEUS        | 5341 COBALT COURT        | CAPE CORAL, FL 33904         | <input checked="" type="checkbox"/> Change | <input type="checkbox"/> Addition            |
| VICE PRESIDENT/DIRECTOR                                | KATHY CONVERSE   | 528 MIDWAY STREET - #2   | NEPTUNE BEACH, FLORIDA 32266 | <input type="checkbox"/> Change            | <input checked="" type="checkbox"/> Addition |
| TREASURER/DIRECTOR                                     | JOHN ASGEIRSON   | 5510 S.W. 76 STREET - #D | MIAMI, FL 33134              | <input type="checkbox"/> Change            | <input checked="" type="checkbox"/> Addition |
| SECRETARY/DIRECTOR                                     | JULIE SMITH-DARY | 1216 HARBOUR POINT DRIVE | PORT ORANGE, FL 32127        | <input type="checkbox"/> Change            | <input checked="" type="checkbox"/> Addition |
|                                                        |                  |                          |                              | <input type="checkbox"/> Change            | <input type="checkbox"/> Addition            |
|                                                        |                  |                          |                              | <input type="checkbox"/> Change            | <input type="checkbox"/> 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 authority like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ED ORTEUS, PRESIDENT/DIRECTOR

6/16/00

(941) 945-1315

CR2E037 (9/99)