2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 30, 2001 8:00 am
Secretary of State
03-12-2001 90011 021 ****61.25

DOCUMENT # N31660

1. Entity Name

CHOICE SINGLE FRIENDS IN FAITH, INC.

Principal Place of Business	Mailing Address
3079 BLOWN FEATHER LANE MULBERRY FL 33860 US	3079 BLOWN FEATHER LANE MULBERRY FL 33860 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.: 612-C Fairmont Ave	Suite, Apt. #, etc.: Same
City & State: Safety Harbor	City & State:
Zip: 34695 Country: USA	Zip: Country:

4. FEI Number 59-2958082 ☐ Applied For ☐ Not Applicable

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
GROTE, JOE P O BOX 43022 6533 9TH AVE N ST PETERSBURG FL 33710	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAGAMAN, E.B. 3415 WEST HILLSBOROUGH AVENUE TAMPA FL 33615	☒ Delete	TITLE (DT) / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Radek Knesl 4711 S. Himes Ave. Apt.# 1705 Tampa, FL. 33611	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COLLINS, ANNE M 1301 HATCH PLACE VALRICO FL 33594	☒ Delete	TITLE (D) / NAME / STREET ADDRESS / CITY-ST-ZIP	Assistant Coordinator Solonita, Steve 11401 9th St N - Apt 1312 St Pete FL 33716	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TYSVER, MAURA A 3079 BLOWN FEATHER LANE MULBERRY FL 33860	☒ Delete	TITLE (D) / NAME / STREET ADDRESS / CITY-ST-ZIP	Coordinator Cheryl Puccini 612-C Fairmont Ave Safety Harbor FL 34695	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS THIBAULT, LYNN 13840 CHERRY CREEK DRIVE TAMPA FL 33618	☐ Delete	TITLE (D) / NAME / STREET ADDRESS / CITY-ST-ZIP	Asst. Coordinator Lynn Thibault 13840 Cherry Creek Dr Tampa, FL 33618	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT TREDO, JOHN P 2642 36 AVENUE SAINT PETERSBURG FL 33713	☒ Delete	TITLE (DS) / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Karen Kinney 1727 Sanchez Ave Lakeland, FL 33801	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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 REQUIRED Radek KNESL 2/26/01 (813) 287-4880
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #