

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90134 023 ****61.25

DOCUMENT # N32528

1. Entity Name

SOUTH LAKE COUNTY MINISTERIAL FELLOWSHIP, INC.

Principal Place of Business

C/O BRIAN KNESET
 15333 CR 455
 MONTVERDE FL 34756
 US

Mailing Address

C/O BRIAN KNESET
 15333 CR 455
 MONTVERDE FL 34756
 US

2. Principal Place of Business

DANNY HARTZOG
 Suite, Apt. #, etc.
1203 F West Hwy 50

City & State
CLERMONT, FL

Zip
34711

Country

3. Mailing Address

DANNY HARTZOG
 Suite, Apt. #, etc.
PO Box 120486

City & State
CLERMONT, FL

Zip
34711

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

KNESET, BRIAN
15333 CR 455
MONTVERDE FL 34756

7. Name and Address of New Registered Agent

Name **HARTZOG, DANNY**
 Street Address (P.O. Box Number is Not Acceptable)
1203 F West Hwy 50
 City **CLERMONT** FL Zip Code **34711**

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 reappointing)

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

TITLE **STD** ☒ Delete
 NAME **KNESET, BRIAN**
 STREET ADDRESS **15333 C R 455**
 CITY-ST-ZIP **MONTVERDE FL 34756**

TITLE **PD** ☐ Delete
 NAME **WAGNET, RICK V**
 STREET ADDRESS **301 N HWY 27**
 CITY-ST-ZIP **CLERMONT FL 34711**

TITLE **VPD** ☐ Delete
 NAME **LANE, DOUG**
 STREET ADDRESS **101 N GRAND HWY**
 CITY-ST-ZIP **CLERMONT FL 34711**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **STD** ☐ Change ☒ Addition
 NAME **HARTZOG, DANNY**
 STREET ADDRESS **1203 F West Hwy 50**
 CITY-ST-ZIP **CLERMONT, FL 34711**

TITLE **PD** ☒ Change ☐ Addition
 NAME **VAN WAGNER, RICK**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

RICK VAN WAGNER

1/15/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)