2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2002 8:00 am
Secretary of State
03-20-2002 90028 031 ****61.25

0079622

DOCUMENT # N38788

1. Entity Name

THE UNITED COMMUNITY CHURCH OF NORTH TAMPA, INC.

Principal Place of Business	Mailing Address
~~P O BOX 16142~~ 5602 IKE SMITH RD ~~TAMPA FL 33687-6142~~ Plant City, Fl 33565-3018	~~P O BOX 16142~~ Same ~~TAMPA FL 33687-6142~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.: 5602 Ike Smith Rd	Suite, Apt. #, etc.
City & State: Plant City Fl	City & State
Zip: 33565-3018 Country: Hillsborough	Zip / Country

4. FEI Number 59-3027227 ☐ 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
JENSEN, MARK A. 6209 CHAUNCY ST TAMPA FL 33647	Name: Chuck McNaught Street Address (P.O. Box Number is Not Acceptable): 5602 Ike Smith Rd City: Plant City **FL** Zip Code: 33565

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: Mark McNaught 3-1-02
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	CD MCNAUGHT, CHUCK 5602 N IKE SMITH RD PLANT CITY FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV JENSEN, MARK 6209 CHAUNCY ST TAMPA FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS BAKER, CAROL 1113 N RIVERHILLS DR TAMPA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS Susan McNaught 5602 N Ike Smith Rd Plant City, Fl 33565	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT CRAMER, MELVA 7605 NORTH 53RD STREET TAMPA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT Cramer, Melva 2902 Billingham Dr Land O Lakes, Fl 34639	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: ~~Melva A. Cramer~~ Melva A. Cramer 2/26/02 813-884-2561 X132
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #