

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N40116

1. Entity Name

FLORIDA CHRISTMAS CONFERENCE, INC.

**FILED**  
**May 29, 2002 8:00 am**  
**Secretary of State**

05-29-2002 93661 013 \*\*\*\*70.00

Principal Place of Business

5321 N GALLOWAY RD  
 LAKELAND FL 33810  
 US

Mailing Address

P O BOX 911  
 KATHLEEN FL 33849  
 US

2. Principal Place of Business

3. Mailing Address

5321 N. GALLOWAY RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LAKELAND, FL

Zip

Country

33810

Country

POLK

4. FEI Number 59-3036828

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

POLLOCK, THOMAS J JR.  
 5321 N. GALLOWAY RD.  
 LAKELAND FL 33810

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 DARRYL W. MEDLEY DT

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE

Darryl W. Medley 4/28/02

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 DVP  
 NAME POLLOCK, TOMMY ☐ Delete  
 STREET ADDRESS 5321 N GALLOWAY RD  
 CITY-ST-ZIP LAKELAND FL

TITLE DP ☒ Change ☐ Addition  
 NAME POLLOCK, TOMMY  
 STREET ADDRESS 5321 N GALLOWAY RD  
 CITY-ST-ZIP LAKELAND, FL 33810

TITLE DS ☒ Delete  
 NAME SCHRADER, GREG  
 STREET ADDRESS 1553 YEOMANS PATH  
 CITY-ST-ZIP LAKELAND FL 33809

TITLE DS ☐ Change ☒ Addition  
 NAME SCHRADER, NICOLE  
 STREET ADDRESS 6545 CREWS LK RD  
 CITY-ST-ZIP LAKELAND, FL 33813

TITLE DT ☒ Delete  
 NAME PINNER, NORMA  
 STREET ADDRESS 3810 COUNTRY RD  
 CITY-ST-ZIP LAKELAND FL 33811

TITLE DVP ☐ Change ☒ Addition  
 NAME PERRY, BILL  
 STREET ADDRESS SW 21st Street  
 CITY-ST-ZIP FT. LAUDEDALE, FL 33312

TITLE DP ☐ Delete  
 NAME MEDLEY, DARRYL  
 STREET ADDRESS 2302 NORETTA LN  
 CITY-ST-ZIP LAKELAND FL 33811

TITLE DT ☒ Change ☐ Addition  
 NAME MEDLEY, DARRYL W.  
 STREET ADDRESS 2302 NORETTA LN  
 CITY-ST-ZIP LAKELAND, FL 33811

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
 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:

Darryl W. Medley  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/02

Date

863-858-4878 EXT 3  
 Daytime Phone #

CR2E037 (9/01)