

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2001 8:00 am
Secretary of State

09-12-2001 90156 014 ****70.00

DOCUMENT # N43072

1. Entity Name

TRUSTEES CASTLE HEIGHTS BAPTIST CHURCH, TAMPA, F

Principal Place of Business

**C/O RICHARD A. RODRIGUEZ
P.O. BOX 17037
TAMPA FL 33682**

Mailing Address

**C/O RICHARD A. RODRIGUEZ
P.O. BOX 17037
TAMPA FL 33682**

10203 N NEBRASKA AVE

2. Principal Place of Business

CASTLE HEIGHTS BAPTIST

3. Mailing Address

10203 N. NEBRASKA AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA FL

City & State

TAMPA FL

Zip

33612

Country

USA

Zip

33612

Country

USA

4. FEI Number

59-2113445

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**RODRIGUEZ, RICHARD A.
10203 N NEBRASKA AVE.
TAMPA FL 33612**

7. Name and Address of New Registered Agent

Name **Betty J. Gaffney**
Street Address (P.O. Box Number is Not Acceptable) **10203 N Nebraska Ave**
City **Tampa** FL Zip Code **33612**

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 **Betty J. Gaffney**

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

(NOTE: Registered Agent signature required when reinstating)

9/03/01

DATE

**FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25**

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 NAME STREET ADDRESS CITY-ST-ZIP	PD PETERSON, TERRY A. 6802 N 15TH ST TAMPA FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PETERSON, ALBERT 214 W AZALEA TAMPA FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MCVEHIL, MARIAN 10314 N NEBRASKA TAMPA FL 33612	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GAFFNEY, BETTY J 1902 SHANNONWOOD CT. BRANDON FL 33510	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, MAMIE 811 E 130TH AVE. TAMPA FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Betty J. Gaffney 1902 Shannonwood Ct Brandon FL 33510-2641	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR EMMA J Stewart 7109 FAIRVIEW PARK DR TAMPA FL 33619	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR JEAN GRIFFIN 2824 ANTHONY ST TAMPA FL 33619	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<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 all other like empowered.

SIGNATURE: **Betty J. Gaffney** **BETTY J GAFFNEY** **9/03/01 (813) 740-7000**

CR2E037 (5/01)