

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2001 8:00 am
Secretary of State

02-21-2001 90021 026 ****61.25

DOCUMENT # N50017

1. Entity Name

FIRST PRESBYTERIAN CHURCH OF BONITA SPRINGS, INC

Principal Place of Business

**9751 BONITA BEACH ROAD
BONITA SPRINGS FL 34135
US**

Mailing Address

**POST OFFICE BOX 2168
BONITA SPRINGS FL 34133
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1622501

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KIRBAS, PAUL J
10590 LANDAU LANE
BONITA SPRINGS FL 34135**

7. Name and Address of New Registered Agent

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

TITLE **SD** ☐ Delete
NAME **OEHLER, JUDITH D**
STREET ADDRESS **752 WIGGINS LK DR #102**
CITY-ST-ZIP **NAPLES FL 34110**

TITLE **D** ☐ Delete
NAME **FRABUTT, PETER J**
STREET ADDRESS **13940 SOUTHAMPTON DRIVE 4001**
CITY-ST-ZIP **BONITA SPRINGS FL**

TITLE **TD** ☐ Delete
NAME **DOYLE, RICHARD J**
STREET ADDRESS **4296 SANCTUARY WAY**
CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE **VD** ☒ Delete
NAME **SHUART, STANLEY**
STREET ADDRESS **13030 BRIDGEFEIN AVE**
CITY-ST-ZIP **BONITA SPRINGS FL 34135**

TITLE **PD** ☒ Delete
NAME **ELDER, JAMES**
STREET ADDRESS **25740 HICKORY BLVD #G-420**
CITY-ST-ZIP **BONITA SPRINGS FL**

TITLE **C** ☒ Delete
NAME **ELDER, JAMES**
STREET ADDRESS **25740 HICKORY BLVD, #G-420**
CITY-ST-ZIP **BONITA SPRINGS FL 34134**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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 **VD**
STREET ADDRESS **KOPF, DONALD**
CITY-ST-ZIP **2094 IMPERIAL CIRCLE**

TITLE ☐ Change ☒ Addition
NAME **PD**
STREET ADDRESS **BALS, CARL**
CITY-ST-ZIP **28427 SOMBRERO DRIVE**

TITLE ☐ Change ☒ Addition
NAME **C**
STREET ADDRESS **BALS, CARL**
CITY-ST-ZIP **28427 SOMBRERO DRIVE**

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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/01

Daytime Phone #

CR2E037 (10/00)