

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N50317

1. Entity Name

FIRST CHRISTIAN CHURCH (DISCIPLES OF CHRIST) OF

Principal Place of Business

1401 WEST NEW YORK AVE.
DELAND FL

Mailing Address

1401 WEST NEW YORK AVE.
DELAND FL

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1852739

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRAGUE, RICHARD
754 W ARIZONA AVE
DELAND FL 32720

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 T
NAME KELLY, CAROLE ROSE ☐ Delete
STREET ADDRESS 1540 W BERESFORD
CITY-ST-ZIP DELAND FL 32720

TITLE T
NAME BRAGUE, RICHARD ☐ Delete
STREET ADDRESS 754 W ARIZONA AVE
CITY-ST-ZIP DELAND FL 32720

TITLE T
NAME LITKE, CAROLYN ☐ Delete
STREET ADDRESS BOX 1251
CITY-ST-ZIP DELAND FL 32720

TITLE T
NAME RENNELLS, HERM ☐ Delete
STREET ADDRESS 114 N. TEMPLE ST
CITY-ST-ZIP DELAND FL

TITLE T
NAME DIERSTEIN, JESSE ☐ Delete
STREET ADDRESS 246 S. HULL ST.
CITY-ST-ZIP DELAND FL 32720

TITLE C
NAME BULLARD, ROGER ☐ Delete
STREET ADDRESS 341 KNOLL ST
CITY-ST-ZIP DELAND FL 32720

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

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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:

RICHARD L. BRAGUE 01/20/01 904 740 7619

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jan 24, 2001 8:00 am
Secretary of State

01-24-2001 90079 005 ****61.25

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DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)

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