

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jul 07, 2000 8:00 am
Secretary of State

07-07-2000 90395 042 ****61.25

DOCUMENT # N51381

1. Entity Name

Central Florida Religious Science Center, Inc.

Principal Place of Business

Mailing Address

3601 Cypress Gardens Rd
Suite K+m
Winter Haven, FL 33884

3601 Cypress Gardens Rd
Suite M
Winter Haven, FL 33884

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

59-3101905

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

00068270

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Rosalie Ritter
3601 Cypress Gardens Rd
Suite K+m
Winter Haven FL 33884

Name
DAVID Ferguson
Street Address (P.O. Box Number is Not Acceptable)
43 Hampden Rd SE
City
Winter Haven FL FL Zip Code
33884

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

5/15/00

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 ☐ Delete
NAME BARBARA Smith
STREET ADDRESS PO BOX 1663
CITY-ST-ZIP EAGLE LAKE, FL 33839
TITLE ☐ Delete
NAME DAVID Ferguson
STREET ADDRESS 93 Hampden Rd
CITY-ST-ZIP Winter Haven FL 33884
TITLE ☐ Delete
NAME Margeret Borra-Bonner
STREET ADDRESS 274 Dixie Circle
CITY-ST-ZIP Haines City, FL 33844
TITLE ☐ Delete
NAME Ann Nagel-Dunkee
STREET ADDRESS 733 High Vista DR
CITY-ST-ZIP Davenport, FL 33837
TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME BARBARA Smith
STREET ADDRESS PO BOX 1663
CITY-ST-ZIP EAGLE LAKE, FL 33839
TITLE ☐ Change ☐ Addition
NAME DAVID Ferguson
STREET ADDRESS 93 Hampden Rd
CITY-ST-ZIP Winter Haven FL 33884
TITLE ☐ Change ☐ Addition
NAME Margeret Borra-Bonner
STREET ADDRESS 274 Dixie Circle
CITY-ST-ZIP Haines City, FL 33844
TITLE ☐ Change ☐ Addition
NAME Ann Nagel-Dunkee
STREET ADDRESS 733 High Vista DR
CITY-ST-ZIP Davenport, FL 33837
TITLE ☐ Change ☐ Addition
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:

DAVID Ferguson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/15/00 324-4815

CR2E037 (9/99)