

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91343 005 ****61.25

DOCUMENT # N51381 ✓

1. Entity Name

CENTRAL FLORIDA RELIGIOUS SCIENCE CENTER, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3601 Cypress Gardens Rd.

Suite, Apt. #, etc.

Suite M

City & State

Winter Haven, Florida

Zip

33884

Country

USA

3. Mailing Address

6039 Cypress Gardens Blvd.

Suite, Apt. #, etc.

#309

City & State

Winter Haven, Florida

Zip

33884

Country

USA

4. FEI Number

59-3101905

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Rev. Rosalie Ritter

Street Address (P.O. Box Number is Not Acceptable)

3601 Cypress Gardens Rd.

Suite M

City

Winter Haven

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

Signature of the current registered agent and title if applicable.

Vance A. Fisher, Secretary

(NOTE: Registered Agent signature required when reinstating)

DATE

5-7-2002
and 4-11-02

FEE IS \$61.25

Initial or Amended UBR

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 Mower, Les 200 Maitland #291 Altamonte Springs, FL 32701	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD McGordon, Jackie 828 W. 2nd Street Lakeland, FL 33805	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Lozell, Jean 1524 Avenue H, N.E. Winter Haven, FL 33884	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Long, Brenda 4475 Cypress Country Lane Lakeland, FL 33801	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Worthy, Doris 2125 Kings Crossing Winter Haven, FL 33880	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Fisher, Vance A. 9333 Painter School Road Berrien Center, MI 49102	TITLE 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 on attachment with an address, without other like empowered.

5-7-2002
and 4-11-2002