

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N92000000543

1. Entity Name

PUNTA GORDA OPEN BIBLE CHURCH INC.

FILED
Mar 08, 2001 8:00 am
Secretary of State

03-08-2001 90094 033 ****70.00

Principal Place of Business

5881 SHALIMAR DRIVE
 5400 ALMAR DRIVE
 PUNTA GORDA FL 33950
 US

Mailing Address

% RALPH A. MICALIZZI
 5400 ALMAR DRIVE
 PUNTA GORDA FL 33950

80043700



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0373593

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MICALIZZI, RALPH A
 5400 ALMAR DRIVE
 PUNTA GORDA FL 33950

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 MERONE, JOSEPH
 9288 PICKENS AVE
 ARCADIA FL ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 MERONE JOSEPH
 849 COWRED RR.
 PORT CHARLOTTE FL. 33952 ☒ Change ☐ Addition ADDRESS

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 BURTON, ROBERT
 9059 GEWANT BLVD.
 CHARLOTTE RANCHETTES FL ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 CARR, STEVEN
 25486 AVILLAS COURT
 PUNTA GORDA FL 33919 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 MICALIZZI, MARK A.
 7560 DRACENA ST.
 PUNTA GORDA FL ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 MICALIZZI MARK A.
 476 WILD DAISEY LANE
 VENICE FL. 34293 ☒ Change ☐ Addition ADDRESS

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 C
 MICALIZZI, RALPH A
 5400 ALMAR DRIVE
 PUNTA GORDA FL ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 BUMBOLOW, THOMAS
 1102 RUM CAY COURT
 PUNTA GORDA FL 33950 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ 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: RALPH A. MICALIZZI Ralph A. Micalizzi 3/5/01 575-2868
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)