

**2002 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # N92000000543**

1. Entity Name

**PUNTA GORDA OPEN BIBLE CHURCH INC.****FILED**  
**Feb 07, 2002 8:00 am**  
**Secretary of State**

02-07-2002 90302 034 \*\*\*\*70.00

Principal Place of Business

Mailing Address

5881 SHALIMAR DRIVE  
5400 ALMAR DRIVE  
PUNTA GORDA FL 33950  
US% RALPH A. MICALIZZI  
5400 ALMAR DRIVE  
PUNTA GORDA FL 33950

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; 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  
849 CONREID DRIVE  
PORT CHARLOTTE FL 33952 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
BURTON, ROBERT  
9059 GEWANT BLVD  
CHARLOTTE RANCHETTES FL ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
CARR, STEVEN  
25486 AVILLAS COURT  
PUNTA GORDA FL 33919 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MICALIZZI, MARK A.  
4976 WILD DAISEY LANE  
VENICE FL 34293 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
C  
MICALIZZI, RALPH A  
5400 ALMAR DRIVE  
PUNTA GORDA FL ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
C MICALIZZI RALPH A.  
316 DULMER DRIVE  
NOKOMIS FL. 34275 ☒ Change ☐ Addition  
ADDRESSTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
BUMBOLOW, THOMAS  
1102 RUM CAY COURT  
PUNTA GORDA FL 33950 ☐ DeleteTITLE  
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**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/14/02 941  
485-4031

CR2E037 (9/01)