

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N92000000598

1. Entity Name

FIRST COMMUNITY CONGREGATIONAL UNITED CHURCH OF

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90164 041 ****61.25

Principal Place of Business

Mailing Address

200 E LELAND HEIGHTS BLVD.
LEHIGH ACRES FL 33936

BOX 657
LEHIGH ACRES FL 33970-0657

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1969598

Applied For

Not Applicable

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

BAKER, RICHARD W.
14 RICHMOND AVE. N.
LEHIGH ACRES FL 33936

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 V ☐ Delete
NAME HORGAN-BAKER, SUSAN
STREET ADDRESS 14 RICHMOND AVE. N.
CITY-ST-ZIP LEHIGH ACRES FL 33936

TITLE T ☐ Change ☒ Addition
NAME DREISBACH, LENORE
STREET ADDRESS P. O. BOX 2032, 8 ELDER ST.
CITY-ST-ZIP ALVA, FL 33920

TITLE D ☐ Delete
NAME ELLIS, RUEL(BOB)
STREET ADDRESS 10749 LEMONTREE CT
CITY-ST-ZIP LEHIGH ACRES FL 33936

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

TITLE D ☐ Delete
NAME SOLIDAY, EUGENE
STREET ADDRESS 2 E. GREENS
CITY-ST-ZIP LEHIGH ACRES FL 33972

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

TITLE T ☐ Delete
NAME STICKLE, DON
STREET ADDRESS 289 GROUND DOVE CIRCLE
CITY-ST-ZIP LEHIGH ACRES FL

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

TITLE P ☐ Delete
NAME BAKER, RICHARD W.
STREET ADDRESS 14 RICHMOND AVE. N.
CITY-ST-ZIP LEHIGH ACRES FL 33936

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

TITLE ☐ Delete
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: *Richard W. Baker* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/00

Date

(941) 369-6284

Daytime Phone #

CR2E037 (9/99)