

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000002719

1. Entity Name

NATIONAL CONSERVATIVE CHRISTIAN CHURCH, INC.

Principal Place of Business

Mailing Address

3650 17TH ST
SARASOTA FL 34235
US

3650 17TH ST
SARASOTA FL 34235
US

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

65-0431171

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

STRUBLE, DONALD W
1910 ROLLING GREEN CIRCLE
SARASOTA FL 34240

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 SD
STREET ADDRESS ARNO, RICHARD G
CITY-ST-ZIP 888 BOULEVARD OF THE ARTS, SUITE 1404
SARASOTA FL

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

TITLE
NAME VD
STREET ADDRESS SMITH, PHYLLIS J
CITY-ST-ZIP 3650 17TH ST
SARASOTA FL 34235

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

TITLE
NAME PTD
STREET ADDRESS STRUBLE, DONALD W
CITY-ST-ZIP 3650 17TH ST
SARASOTA FL 34235

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

TITLE
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CITY-ST-ZIP ☐ Delete

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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:

Donald W. Struble
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 3/12/02 Daytime Phone # 941-951-6486

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90071 024 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)