

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90173 031 ****70.00

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1. Corporation Name

**FIRST CONGREGATIONAL UNITED CHURCH OF CHRIST OF
ST. PETERSBURG, INCORPORATED**

150244 90173 31

Principal Place of Business

240 4TH ST. NORTH
ST. PETERSBURG FL 33701

Mailing Address

222 EAST WELBOURNE AVE
WINTER PARK FL 32789
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date Incorporated or Qualified

10/01/1993

4. FEI Number

59-0624385

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

**BORKO, DOUGLAS M DR
222 EAST WELBOURNE AVE
WINTER PARK FL 32789**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

M. Douglas Borko
Signature, typed or printed name of registered agent and title if applicable.

M. Douglas Borko

1/20/99

DATE

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE **VD** ☒ DELETE
NAME **FREEZE, MARCELLA**
STREET ADDRESS **512 TEAGARDEN COURT**
CITY-ST-ZIP **WINTER GARDEN FL 34787**

TITLE **T** ☒ DELETE
NAME **ROMIG, LARRY G**
STREET ADDRESS **6029 18TH AVENUE NORTH**
CITY-ST-ZIP **ST PETERSBURG FL**

TITLE **PD** ☒ DELETE
NAME **MILLER, ARNOLD**
STREET ADDRESS **7082 N.W. 3RD AVENUE**
CITY-ST-ZIP **BOCA RATON FL**

TITLE **SD** ☐ DELETE
NAME **ATCHISON, JAMES**
STREET ADDRESS **1960 N SWINTON AVENUE**
CITY-ST-ZIP **DELRAY BEACH FL**

TITLE **M** ☐ DELETE
NAME **BORKO, DOUGLAS M**
STREET ADDRESS **222 E. WELBOURNE AVENUE**
CITY-ST-ZIP **WINTER PARK FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **VD** ☒ Change ☐ Addition
1.2 NAME **Feldman, Judy**
1.3 STREET ADDRESS **13085 Ortega Lane**
1.4 CITY-ST-ZIP **North Miami, FL 33157**

2.1 TITLE **T** ☒ Change ☐ Addition
2.2 NAME **Bizer, Paul**
2.3 STREET ADDRESS **200 - 24th Avenue**
2.4 CITY-ST-ZIP **Indian Rocks Beach, FL 33785-3099**

3.1 TITLE **PD** ☒ Change ☐ Addition
3.2 NAME **Klossner, William**
3.3 STREET ADDRESS **1201 Aqui Esta**
3.4 CITY-ST-ZIP **Punta Gorda, FL 33950**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

M. Douglas Borko
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/99

Date

407/645-5458

Daytime Phone #

CR2E037 (11/98)