

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000004580

1. Entity Name

FIRST CONGREGATIONAL UNITED CHURCH OF CHRIST OF

Principal Place of Business

240 4TH ST. NORTH
ST. PETERSBURG FL 33701

Mailing Address

924 N MAGNOLIA AVE
STE 250
ORLANDO FL 32803
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

BORKO, DOUGLAS M DR
924 N MAGNOLIA AVE
STE 250
ORLANDO FL 32803

7. Name and Address of New Registered Agent

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

TITLE VD ☐ Delete
NAME FELDMAN, JUDY
STREET ADDRESS 13085 ORTEGA LANE
CITY-ST-ZIP NORTH MIAMI FL 33157

TITLE T ☐ Delete
NAME BIZER, PAUL
STREET ADDRESS 200-24TH AVENUE
CITY-ST-ZIP INDIAN ROCKS BEACH FL 33785-3099

TITLE PD ☐ Delete
NAME KLOSSNER, WILLIAM
STREET ADDRESS 1201 AGUI-ESTA
CITY-ST-ZIP PUNTA GORDA FL 33950

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 924 N MAGNOLIA AVE STE 250
CITY-ST-ZIP ORLANDO FL 32803

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE VD ☒ Change ☐ Addition
NAME La VOO, GEORGE
STREET ADDRESS 4313 HURON LANE
CITY-ST-ZIP CLEARWATER, FL 33762-5212

TITLE SD ☒ Change ☐ Addition
NAME SHARON ROGERS-GROGGETT
STREET ADDRESS 200 N. 46TH AVENUE
CITY-ST-ZIP HOLLYWOOD, FL 33021-6604

TITLE ☐ Change ☐ Addition
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:

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

1/9/01

Date

407/835-7501

Daytime Phone #

FILED
Jan 22, 2001 8:00 am
Secretary of State

01-22-2001 90074 001 ***306.25



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0624385

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

CR2E037 (10/00)

0026158