

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000000349

1. Entity Name

OSCEOLA BIBLE CHAPEL, INC.

Principal Place of Business

108 S. FORREST AVE.  
KISSIMMEE FL 34741

Mailing Address

108 S. FORREST AVE.  
KISSIMMEE FL 34741

2. Principal Place of Business

4135 Bergamont Court

3. Mailing Address

4135 Bergamont Ct

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Kissimmee FL

City & State

Kissimmee FL

Zip

34746

Country

Zip

34746

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3227823

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

PLETT, LESLIE P  
C/O DONALD E LEPIC  
4135 BERGAMONT COURT  
KISSIMMEE FL 34746

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

JULY 10 2002

DATE

After September 13, 2002,  
min. will be \$236.25.

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 D  
NAME RAITH, R.J.  
STREET ADDRESS 311 MEDINA COURT  
CITY-ST-ZIP KISSIMMEE FL ☐ Delete

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

TITLE CTD  
NAME LEPIC, DONALD E  
STREET ADDRESS 4135 BERGAMONT CT.  
CITY-ST-ZIP KISSIMMEE FL ☐ Delete

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

TITLE D  
NAME PLETT, LESLIE P  
STREET ADDRESS 108 S. FORREST AVE.  
CITY-ST-ZIP KISSIMMEE FL 34741 ☐ Delete

TITLE D  
NAME PLETT, LESLIE P.  
STREET ADDRESS 6 WISCONSIN AVE.  
CITY-ST-ZIP ST. CLOUD FL 34769 ☒ Change ☐ Addition

TITLE D  
NAME ALBERS, THOMAS G  
STREET ADDRESS 3272 TIMUCA CIRCLE  
CITY-ST-ZIP ORLANDO FL 32837 ☐ Delete

TITLE D  
NAME ALBERS, THOMAS G  
STREET ADDRESS 1501 FULLERS CROSS ROAD  
CITY-ST-ZIP WINTER GARDEN FL 34787 ☒ Change ☐ Addition

TITLE D  
NAME MYERS, BRYAN D  
STREET ADDRESS 1050 HERON CT  
CITY-ST-ZIP POINCIANA FL 34759 ☐ Delete

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

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
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: Donald E Lopic REQUIRED DONALD E LEPIC JULY 10, 2002 407 343-2624

CR2E037 (4/02)