## **2000 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment with an address, with all other like

SIGNATURE:

## **FILED** DOCUMENT # **N94000005383** May 08, 2000 8:00 am 1. Entity Name Secretary of State CHRISTIANS UNITED FOR THE HOLY LAND INC. 05-08-2000 90063 005 \*\*\*\*61.25 Principal Place of Business Mailing Address 6273 CRESCENT LAKE WAY 6273 CRESCENT LAKE WAY LAKE WORTH FL 33463-7920 **LAKE WORTH FL 33413-3037** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3278354 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) SAKOLSKY, LOUIS A REV 4120 FOXBORO DR **NEW PT RICHEY FL 34653** 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 DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Delete Addition TITLE TITI F SAKOLSKY, REV. LOUIS A. NAME NAME STREET ADDRESS STREET ADDRESS 6273 CRESCENT LAKE WAY CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33463-7920 Addition TITLE Change ☐ Delete TITLE YOUNG, DENIIS NAME NAME STREET ADDRESS STREET ADDRESS 1401 WILSON ROAD CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL Delete ☐ Addition ST TITLE TITLE VECCHIO, BARBARA NAME NAME STREET ADDRESS STREET ADDRESS 470 FAIRWOOD AVENUE #153 CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33759 ☐ Change Addition D Delete TITLE TITLE SAKOLSKY, CAROL A. NAME NAME STREET ADDRESS STREET ADDRESS 4120 FOXBORO DR. CITY-ST-7IP CITY-ST-ZIP **NEW PORT RICHEY FL** [] Change ☐ Addition TITLE ☐ Delete TITLE YOUNG, ERIC E. NAME NAME STREET ADDRESS STREET ADDRESS 1401 WILSON RD. CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL Addition Change TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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