

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000005757

1. Entity Name

PRIMERA IGLESIA CRISTIANA CONGREGACIONAL DE PLAN

FILED
Feb 16, 2000 8:00 am
Secretary of State

02-16-2000 90120 022 ****61.25

Principal Place of Business

908 E REYNOLDS ST
PLANT CITY FL 33565
US

Mailing Address

P.O. BOX 536
PLANT CITY FL 33564-0536

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3238635

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

SANTANA, JULIO A REV
306 E. TOMLIN STREET
PLANT CITY FL 33566

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 ☐ Delete
NAME PT
STREET ADDRESS BASS, JAMES
CITY-ST-ZIP 1103 N. WHEELER STREET
PLANT CITY FL 33566

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

TITLE ☒ Delete
NAME VT
STREET ADDRESS BASS, JAMES
CITY-ST-ZIP 1103 N. WHEELER ST.
PLANT CITY FL 33566

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

TITLE ☐ Delete
NAME ST
STREET ADDRESS HALLBERG, LORENE
CITY-ST-ZIP 3209 CONCORD WAY
PLANT CITY FL 33566

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

TITLE ☒ Delete
NAME TT
STREET ADDRESS FROSELL, KIM
CITY-ST-ZIP P.O. BOX 3295 N/A
PLANT CITY FL 33566

TITLE ☒ Change ☒ Addition
NAME T Pruet, Delia
STREET ADDRESS 3217 Kilmer Dr
CITY-ST-ZIP Plant City, FL 33567

TITLE ☐ Delete
NAME D
STREET ADDRESS SANTANA, JULIO A REV
CITY-ST-ZIP 2426 RIVERWOOD DR.
MULBERRY FL 33860

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

TITLE ☐ Delete
NAME VT
STREET ADDRESS CONDIT, GORDIN
CITY-ST-ZIP 1200 E. CLEVELAND STREET
HERNANDO FL 32642

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2F017 (9/98)