

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 08, 2003 8:00 am
Secretary of State

01-08-2003 90045 020 ****61.25

DOCUMENT # N95000001223

1. Entity Name

**REDEMPTION LUTHERAN CHURCH OF PANAMA CITY, FLORI
DA, INC.**



Principal Place of Business

**1700 EAST 11TH STREET
PANAMA CITY FL 32401**

Mailing Address

**1700 EAST 11TH STREET
PANAMA CITY FL 32401**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1488783**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BRILL, MICHAEL
3401 STANFORD ROAD
APT 1410
PANAMA CITY FL 32405**

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)

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Delete
NAME	PITTMAN, CURTIS	
STREET ADDRESS	1605 ARKANSAS AVE.	
CITY-ST-ZIP	LYNN HAVEN FL 32444	
TITLE	SD	<input type="checkbox"/> Delete
NAME	SMITH, BERTHA	
STREET ADDRESS	1002 KIRKLIN AVE.	
CITY-ST-ZIP	PANAMA CITY-FL 32401	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BRILL, MICHAEL	
STREET ADDRESS	2401 STANFORD ROAD APT 1410	
CITY-ST-ZIP	PANAMA CITY FL 32405	
TITLE	PED	<input type="checkbox"/> Delete
NAME	OYER, EDWARD	
STREET ADDRESS	3320 S HARBOUR CIRCLE	
CITY-ST-ZIP	PANAMA CITY FL 32405	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: UNAVAILABLE FOR SIGNATURE

01/05/03 (850) 319-7390

CR2E037 (10/02)