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May 09 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000002844 (6)**

1. Corporation Name

**ASSOCIATION OF BOARDS AND CONGREGANTS OF UNITY I  
NCORPORATED**

Principal Place of Business

Mailing Address

**12645 - 97TH STREET NORTH  
LARGO FL 34643**

**12645 - 97TH STREET NORTH  
LARGO FL 33773-1215**

3. Date Incorporated or Qualified  
**05/28/1996**

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

**21**

Suite, Apt. #, etc.

**26**

Suite, Apt. #, etc.

**22**

City & State

**27**

City & State

**23**

Zip

Country

**28**

Zip

Country

**24**

**25**

**29**

**30**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PETERSEN, BETTE J  
12645 - 97TH STREET NORTH  
LARGO FL 34643**

**81** Name

**82** Street Address (P.O. Box Number is Not Acceptable)

**83**

**84** City

**FL**

**85** Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE  
NAME **PETERSEN, BETTE J**  
STREET ADDRESS **12645 - 97TH STREET NORTH**  
CITY-ST-ZIP **LARGO FL 34643**

TITLE **D** ☐ DELETE  
NAME **HUEBNER, FRED**  
STREET ADDRESS **1 BOOTH BLVD.**  
CITY-ST-ZIP **SAFETY HARBOR FL 34695**

TITLE **D** ☐ DELETE  
NAME **COBB, LEWIS S**  
STREET ADDRESS **7302 - 51ST TERRACE NORTH**  
CITY-ST-ZIP **ST. PETERSBURG FL 33709**

TITLE **D** ☐ DELETE  
NAME **REYNOLDS, ED**  
STREET ADDRESS **30 YAWL LANE**  
CITY-ST-ZIP **PALM HARBOR FL 34618**

TITLE **D** ☒ DELETE  
NAME **JUSTICE, ROBERT**  
STREET ADDRESS **211 PASADENA AVENUE #108**  
CITY-ST-ZIP **ST. PETERSBURG FL 33710**

TITLE **D** ☒ DELETE  
NAME **SHIELDS, ANDREA**  
STREET ADDRESS **10599 - 125TH AVENUE N.**  
CITY-ST-ZIP **LARGO FL 34643**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Fred Huebner VERAD HUEBNER APR 27, 1997 (813) 791-7732  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0061747

CR2E037 (9/96)