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

DOCUMENT # N97000000882

1. Entity Name

UNITY OF	F BONITA SPRINGS CHRISTIA	AN CHURCH, INC.					
Principal Place of Business 8951 BONITA BEACH RD BONITA SPRINGS FL 34135		Mailing Address 8951 BONITA BEACH RD STE 640 BONITA SPRINGS FL 34135 US		1400100 500 500	IX 1884 8841 8841 8844 8844 8841 8841	DANSI KRIMI KANTI KANTI KANTI	
Principal Place of Business 3.		3. Mailing Address	0 Nia . 35/				
Suite, Apt. #, etc.		Suite, Apt. #, etc. 8951 Boute 1	Beach Rd	# 685 a	CHECK HERE IF MAKING (CHANGES	
City & Stat	te	City & State		4. FEI Number 65	-0554200	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Sta	atus Desired	8.75 Additional se Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
			Name	Name			
LOCKEY, SAUNDRA 28062 OAK LANE			Street Address (P.O. Box Number is Not Acceptable)				
	SPRINGS FL 34135					<u> </u>	
			City		FL	Zip Code	
the obligated signature	e named entity submits this statement fortions of registered agent. Signature, typed or printed name of registered agent. FILE NOW: FEE IS \$61.25	and title if applicable. (NOTE: Reg	gistered Agent signature req		DATE Make Check	Payable to	
ay ay			Trust Fund Contribution.		Florida Departn		
TITLE	OFFICERS AND DI	RECTORS Delete	TITLE	ADDITIONS/CHANGE	S TO OFFICERS AND DIRE	CTORS IN 10 Change Addition	
NAME STREET ADDRESS	SHEEHAN, LLOYD 3621 E TAMIAMI TRAIL		NAME STREET ADDRESS	1324 SHUE	two of way	Parker	
CITY-ST-ZIP	NAPLES FL 34112		CITY-ST-ZIP	<u>airte Spri</u>	ing The	34134	
TITLE NAME	D LOCKEY, SANDRA	Delete	TITLE NAME	ann Dun	from 1	Change Addition	
STREET ADDRESS	64 4TH ST	చిక్కారి. ఇప్పట్టి ఇ	STREET ADDRESS	97 101	NORA BIO	7	
CITY-ST-ZIP	BONITA SPRINGS FL 34134		CITY-ST-ZIP	THYERS	Beach Fr	(33931	
TITLE	V NOCCO MILLIANA	☐ Delete	TITLE	•	(Change	
NAME STREET ADDRESS	BOSCO, WILLIAM 11840 EL DORADO DRIVE		NAME STREET ADDRESS				
CITY-ST-ZIP	BONITA SPRINGS FL 34135		CITY-ST-ZIP				
TITLE	T	Delete	TITLE 5		[Change Addition	
NAME	THOMAS, WILLIAM		NAME	6619		iore D	
STREET ADDRESS CITY-ST-ZIP	1350 YESICH ANN CIRCLE NAPLES FL 34110		STREET ADDRESS CITY-ST-ZIP	7388	ones onesonn Peng H	34135	
TITLE	D	☐ Delete	TITLE			Change Addition	
NAME	LOCKEY, SANDRA		NAME		V		
STREET ADDRESS CITY-ST-ZIP	28062 OAK LANE		STREET ADDRESS CITY-ST-ZIP			ŀ	
TITLE	BONITA SPRINGS FL 34135	☐ Delete		1 1	1	☐ Change	
NAME		rt Deiste	NAME	SKZY W	Hentine	_ Change	
STREET ADDRESS	· ·		STREET ADDRESS	3055 K	111 E RE	UK ~	

FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 91353 008 ****61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 all address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE

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