

2000 UNIFORM BUSINESS REPORT.(UBR)

FILED

May 03, 2000 8:00 am
Secretary of State

05-03-2000 90032 004 ****61.25

DOCUMENT # N97000002083

1. Entity Name

MARY HOUSE MINISTRY, INC.

Principal Place of Business

Mailing Address

217-219 57TH AVE. EAST
BRADENTON FL 34203

P O BOX 21086
BRADENTON FL 34204-1086
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1803 55TH AVENUE WEST

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BRADENTON, FL

City & State

4. FEI Number

59-3444450

Applied For

Not Applicable

Zip

34207

Country

USA

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

GALVANO, WILLIAM S ESQ.
1023 MANATEE AVE. WEST
BRADENTON FL 34210

7. Name and Address of New Registered Agent

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:
FEES 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 NAME STREET ADDRESS CITY-ST-ZIP	DT DAVID P HAUCK 5024 PERIDIA BLVD BRADENTON FL 34203	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRUCE, JONATHAN 9203 63RD AVE- EAST BRADENTON FL 34202	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLOUD, SARAH 4707 MIRFIELD DR. BRADENTON FL 34203	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FREDI, AUGUST 4207 MURFIELD DR. BRADENTON FL 34203	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MICKEY, MARY LOU 4902 KILTY COURT EAST BRADENTON FL 34203	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SLOSS, JOSEPH 7814 SEVILLE CIRCLE BRADENTON FL 34209	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV REV. CARL THRUN 3650 BEE RIDGE ROAD SARASOTA, FL 34239	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEITH HARVEY 1463 OAKFIELD DRIVE BRANDON, FL 33511	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRY MICKEY 4902 KILTY COURT EAST BRADENTON, FL 34203	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ERIC VIGEN 5400 OCEAN BOULEVARD SARASOTA, FL 34241	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SARAH CLOUD 4706 TICH BORNE CIRCLE SARASOTA, FL 34241	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOSEPH SLOSS, MD. 9234 13TH AVENUE CIRCLE BRADENTON, FL 34209	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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:

DAVID P. HAUCK **DAVID P. HAUCK** TREASURER 04/24/00 941-751-4635

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)