

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2001 8:00 am
Secretary of State

05-07-2001 90055 018 *****70.00

DOCUMENT # N98000001547

1. Entity Name

VINCE RIZZO EVANGELISTIC MINISTRIES CHURCH, INC.

Principal Place of Business

**1031 NORTH TAMiami TRAIL
 NORTH FORT MYERS FL 33903**

Mailing Address

**1031 NORTH TAMiami TRAIL
 NORTH FORT MYERS FL 33903**

00047983



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

17281 N. TAMiami TRAIL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

N. Fort Myers, FL 33903

4. FEI Number

57-1047126

Applied For

Not Applicable

Zip

Country

Zip

Country

33903

USA

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

**RIZZO, VINCENT T JR.
 1031 NORTH TAMiami TRAIL
 NORTH FORT MYERS FL 33903**

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

Pastor Vince Rizzo Jr.

4/27/2001

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 NAME STREET ADDRESS CITY-ST-ZIP	P RIZZO, VINCENT T REV. 1319 RIVER ROAD, LOT B-20 NORTH NORTH FORT MYERS FL 33903	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JUDGE, JOHN REV 2024 SE 13TH ST CAPE CORAL FL 33990	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST RIZZO, LAURA 1819 RIVER ROAD LOT B-20 NORTH FORT MYERS FL 33903	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EAGLE, GREG 4134 ERINDALE DRIVE FORT MYERS FL 33903	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MYERS, RICH 8181 RICH ROAD FORT MYERS FL 33917	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALPORQUE, DEAN CEDRIC 1620 BEACH PARKWAY WEST CAPE CORAL FL 33914	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Vince MYERS P.O. Box 50763 FORT MYERS, FL 33994 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Judge, John Rev 2024 SE 13th St Cape Coral, FL 33990 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Schoettler, Carl 1706 S.E. 10th PL Cape Coral, FL 33990 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D McKENZIE, William DE 6566 Kes Thal Cir Fort Myers, FL 33912 <input type="checkbox"/> Change <input checked="" 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:

Pastor Vince Rizzo Jr.

Date

4/27/01

Daytime Phone #

656-5270

CR2E037 (10/00)