2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9800005089

STREET ADDRESS

SIGNATURE

GIBSONTON FL 33534

FILED Sep 05, 2001 8:00 am Secretary of State 1. Entity Name 09-05-2001 90008 046 ****61.25 GIBSONTON UNITED METHODIST CHURCH, INC. Mailing Address Principal Place of Business 6104 MARILLA AVE. GIBSONTON FL 33534 6104 MARILLA AVE. D0062504 GIBSONTON FL 33534 1 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1882970 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) STEWART, FRANK S ESQUIRE 3560 N. 29TH ST. TAMPA FL 33605 City 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) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to After September 12, 2001, min. will be \$236.25 Trust Fund Contribution. Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Delete TITLE TITLE ☐ Change ☐ Addition KATO, WAYNE PASTOR NAME NAME STREET ADDRESS 6104 MARILLA AVE. STREET ADDRESS **CR2E037** CITY-ST-ZIP GIBSONTON FL 33534 CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete CUNNINGHAM, PHIL PASTOR NAME STREET ADDRESS 6220 FLORIDA DR. STREET ADDRESS CITY-ST-ZIP APOLLO BEACH FL 33572 CITY-ST-ZIP DVP Delete TITLE ☐ Change Addition TITLE KRAMER, JIM NAME NAME STREET ADDRESS 7020 GRAND RAPIDS DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33619** ☐ Change ☐ Addition TITLE ☐ Delete TITLE JOHNSON, ROBERT NAME NAME 9905 CALIFORNIA STREET STREET ADDRESS STREET ADDRESS GIBSONTON FL 33534 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition GILHOOL, VIRGINIA NAME NAME 308 RIVER BAY DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **TAMPA FL 33619** CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE Addition JOHNSON, MARY NAME NAME 9905 CALIFORNIA ST.

STREET ADDRESS

Hobert Wayne Kato

Robert Wayne Kato

Robert Wayne Kato

Robert Wayne Kato

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 attackment with an address, with all other like empowered.