

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

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90062 049 ****61.25

DOCUMENT # N98000007303

1. Entity Name
FELLOWSHIP OF BELIEVERS IN CHRIST, INC.



Principal Place of Business
**718 VIRGINIA AVE.
TARPON SPRINGS FL 34689**

Mailing Address
**23 E. TARPON AVE.
TARPON SPRINGS FL 34689**

90007302

2. Principal Place of Business

3. Mailing Address

307 SO. SPRINGS BLVD.

307 SO. SPRINGS BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
TARPON SPRINGS FL

City & State
TARPON SPRINGS FL

4. FEI Number **59-3550862**

Applied For
Not Applicable

Zip
34689

Country
USA

Zip
34689

Country
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

**KLIMIS, GEORGE N
23 E. TARPON AVE.
TARPON SPRINGS FL 34689**

Name

Street Address (R.F. Box Number is Not Acceptable)

**27 E. Orange St
TARPON SPRINGS FL**

City

FL 34689

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
KLIMIS, NICHOLAS
305 S SPRINGS BLVD
TARPON SPRINGS FL 34689** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MARY KLIMIS
305 S. Springs Blvd
TARPON SPRINGS FL 34689** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CURTIS, BARBARA A
1503 POINSETTIA AVE.
TARPON SPRINGS FL 34689** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MARIANN WEAVER
609 NO. FLA. AVE.
TARPON SPRINGS, FL 34689** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
PECK-KLIMIS, VYV
718 VIRGINIA AVE.
TARPON SPRINGS FL 34689** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
307 S. Springs Blvd ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
KLIMIS, GEORGE N
718 VIRGINIA AVE.
TARPON SPRINGS FL 34689** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
307 S. Springs Blvd ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
CURTIS, BARBARA A
1503 POINSETTIA AVE
TARPON SPRINGS FL 34689** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Joni L. BUSCEMA
8806 CRESCENT FOREST BLVD
New Pt. Richey, FL 34654** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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 duly empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 1/6/02

CR2E037 (10/02)