

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000007317

1. Entity Name

ST. FRANCIS INDEPENDENT CATHOLIC COMMUNITY, INC.

FILED
Jun 05, 2000 8:00 am
Secretary of State

06-05-2000 90033 003 ****70.00

Principal Place of Business

605 BELVEDERE RD
STE 8
WEST PALM BEACH FL 33405

Mailing Address

605 BELVEDERE RD
STE 8
WEST PALM BEACH FL 33405-1216

2. Principal Place of Business

4132 Pot o Gold St

Suite, Apt. #, etc.

3. Mailing Address

P O Box 16304

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

West Palm Beach FL

City & State

West Palm Beach

4. FEI Number

65-0886179

Applied For

Not Applicable

Zip

33406

Country

Zip

33416

Country

USA

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

6. Name and Address of Current Registered Agent

SCHOTT, FREDRICK P
212 N K STREET #9
LAKE WORTH FL 33460

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1744 Crestwood Blvd

City

Lake Worth

FL

Zip Code

33460

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:
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

TITLE PD ☐ Delete
NAME SCHOTT, FREDRICK P
STREET ADDRESS 212 N. K. ST. #9
CITY-ST-ZIP LAKE WORTH FL 33460

TITLE VPD ☒ Delete
NAME AYERS, WILLIAM
STREET ADDRESS 412 EL PRADO
CITY-ST-ZIP WEST PALM BEACH FL 33405

TITLE ST ☐ Delete
NAME RICHARDS, FRANKLIN T
STREET ADDRESS 841 SUNSET RD
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1744 Crestwood Blvd
CITY-ST-ZIP Lake Worth FL 33460

TITLE VPD ☐ Change ☒ Addition
NAME Chas Vogler
STREET ADDRESS 4132 Pot o Gold St
CITY-ST-ZIP West Palm Beach FL 33406

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 4132 Pot o Gold St
CITY-ST-ZIP West Palm Beach FL 33406

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Franklin T Richards
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/22/00

Date

561-655-3245

Daytime Phone #

CR20007 0001