

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000000713

1. Entity Name

DREW PARK CHURCH OF CHRIST, INC.

Principal Place of Business

3907 W. DR. MLK JR. BLVD.
TAMPA FL

Mailing Address

3907 W. DR. MLK JR. BLVD.
TAMPA FL

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

DOUGLAS, JOHN L
513 HILL DALE RD.
BRANDON FL 33510

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:
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
NAME DOUGLAS, JOHN L
STREET ADDRESS 513 HILL DALE RD
CITY-ST-ZIP BRANDON FL 33510 ☐ Delete

TITLE VD
NAME HAMERTER, JAMES
STREET ADDRESS 6415 N 47TH STREET
CITY-ST-ZIP TAMPA FL 33610 ☐ Delete

TITLE SD
NAME ROBBINS, JACOB
STREET ADDRESS P.O. BOX 195
CITY-ST-ZIP BRANDON FL 33509 ☐ Delete

TITLE TD
NAME HAMILTON, HENRY
STREET ADDRESS 4601 E. SERENA DR.
CITY-ST-ZIP TAMPA FL 33617 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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

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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR John L Douglas 3-26-01 813-654-2620

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90036 006 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)