

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

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90126 027 ****61.25

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1. Entity Name

FIRST FAIRFIELD PRESBYTERIAN CHURCH, INC.



Principal Place of Business

**9349 N.W. HWY 225A
OCALA FL 34482**

Mailing Address

**9349 N.W. HWY 225A
OCALA FL 34482**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1717424**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FRAZEE, CRAIG
9349 N.W. HWY 225A
OCALA FL 34482**

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. 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	DP	☐ Delete
NAME	FRAZEE, CRAIG	
STREET ADDRESS	9349 N.W. HWY 225A	
CITY-ST-ZIP	OCALA FL 34482	
TITLE	VPD	☐ Delete
NAME	NAGELE, BETTE G	
STREET ADDRESS	12600 N.W. HWY 225	
CITY-ST-ZIP	REDDICK FL 32686	
TITLE	ST	☐ Delete
NAME	REID, KAREN	
STREET ADDRESS	14020 N.W. HWY 225A	
CITY-ST-ZIP	REDDICK FL 32686	
TITLE	D	☐ Delete
NAME	GUTSCHLAG, RABB Y	
STREET ADDRESS	6399 N.W. 100TH STREET	
CITY-ST-ZIP	OCALA FL 34482	
TITLE	D	☐ Delete
NAME	GATRELL, FRED	
STREET ADDRESS	6400 N.W. HWY 316	
CITY-ST-ZIP	REDDICK FL 32686	
TITLE	AST	☐ Delete
NAME	MASON, CARA JUNE	
STREET ADDRESS	13429 N.W. HWY 225	
CITY-ST-ZIP	REDDICK FL 32686	

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	
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: Craig Frazee 4-12-03 352 4279813

CR2E037 (10/02)