2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

May 04, 2000 8:00 am Secretary of State DOCUMENT # N9900001526 Salar Branch & gar CHRIST AR PRESBYTERIAN CHURCH, INC. 03-13-2000 90025 023 ****61.25 Principal Place of Business Mailing Address 6664 MEANDERING WAY 6664 MÉANDERING WAY **BRADENTON FL 34202 BRADENTON FL 34202-1822** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 59-1022139 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) JURKOWSKI, BRYAN 6664 MEANDERING WAY **BRADENTON FL 34202** 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) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. 66/6) Addition TITLE ☐ Delete TITLE ☐ Change WYATT, JAMES NAME NAME CR2E037 STREET ADDRESS STREET ADDRESS 709 132ND STREET CIRCLE N.E. COY-ST-7P CITY-ST-ZIP **BRADENTON FL 34202** ☐ Change ☐ Addition Delete TITLE TITLE NAME THOMPSON, DALE NAME STREET ADDRESS STREET ADDRESS 10308 CLUBHOUSE DR. CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL 34203 ☐ Change ☐ Addition TITLE ☐ Delete NAME MULLEN, FRANK-NAME STREET ADDRESS STREET ADDRESS 11230 PRIMROSE CIR. CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL 34202 ☐ Change ■ Addition TITLE ☐ Delete TITLE WEIDENMULLER, STEVE NAME NAME STREET ADDRESS STREET ADDRESS 7610 PARTRIDGE ST. CIRCLE CDV_ST-7/8 CITY-ST-ZIP **BRADENTON FL 34202** ☐ Channe ☐ Addition TITLE ☐ Delete TITLE NAME NAME LANHAM, FABIAN STREET ADDRESS STREET ADDRESS 4823 77TH STREET EAST CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34203** ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

UNE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR