

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90084 019 ****70.00

DOCUMENT # N99000006650

1. Entity Name

ST. MARY'S PARISH OF ST. JOHN'S CATHOLIC CHURCH,

Principal Place of Business

Mailing Address

6616 28TH ST SOUTH
 ST. PETERSBURG FL 33712
 US

6616 28TH ST SOUTH
 ST. PETERSBURG FL 33712
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3632478

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NIZNIK, ROBERT REV
 6616 28TH ST SOUTH
 ST. PETERSBURG FL 33712

Name **RT. REV. ROBERT NIZNIK**

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

6616 28th ST. SOUTH

City **ST. PETERSBURG**

FL

Zip Code **33712**

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 *RT. Rev. Robert Niznik*

RT. REV. ROBERT NIZNIK

1-13-01

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME **P NIZNIK, ROBERT REV.** Delete
 STREET ADDRESS **6616 28TH ST SOUTH**
 CITY-ST-ZIP **ST. PETERSBURG FL 33712**

TITLE NAME **P RT. REV. ROBERT NIZNIK** Change Addition
 STREET ADDRESS **6616 28th STREET SOUTH**
 CITY-ST-ZIP **ST. PETERSBURG, FL 33712**

TITLE NAME **VP BEZLER, GEORGE REV.** Delete
 STREET ADDRESS **6616 28TH ST. SOUTH**
 CITY-ST-ZIP **ST. PETERSBURG FL 33712**

TITLE NAME **T BARBARA MILAN** Change Addition
 STREET ADDRESS **8461 MONARCH CIRCLE**
 CITY-ST-ZIP **SEMINOLE, FL 33772**

TITLE NAME **SD ARSENAULT, REBEKAH** Delete
 STREET ADDRESS **1111 BAYSHORE BLVD.**
 CITY-ST-ZIP **CLEARWATER FL 34619**

TITLE NAME **D MAURICE, STANTE** Change Addition
 STREET ADDRESS **751 42nd AVE. N.E.**
 CITY-ST-ZIP **ST. PETERSBURG, FL 33703**

TITLE NAME **T STANTE, MAURICE** Delete
 STREET ADDRESS **751 42ND AVE. NE**
 CITY-ST-ZIP **ST. PETERSBURG FL 33703**

TITLE NAME **D JOHANNA GILLINGHAM** Change Addition
 STREET ADDRESS **3895 50th AVE S.**
 CITY-ST-ZIP **ST. PETERSBURG, FL 33711**

TITLE NAME **T GILLINGHAM, JOHANNA** Delete
 STREET ADDRESS **3895 50TH AVE. S.**
 CITY-ST-ZIP **ST. PETERSBURG FL 33711**

TITLE NAME Change Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME **T SUDOL, PATRICIA** Delete
 STREET ADDRESS **3310 LONG BEACH**
 CITY-ST-ZIP **BRANT BEACH NJ 08008**

TITLE NAME Change Addition
 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: *RT. REV. ROBERT NIZNIK*

1-13-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)