

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

Dominion Charities, Inc.

FILED
May 01, 2001 8:00 am
Secretary of State

05-01-2001 90108 038 ****61.25

Principal Place of Business

Mailing Address

2. Principal Place of Business

3590 23rd Ave SW

Suite, Apt. #, etc.

Naples, FL

City & State

Naples, FL

Zip

34117

Country

USA

3. Mailing Address

3590 23rd Ave SW

Suite, Apt. #, etc.

Naples, FL

City & State

Naples, FL

Zip

34117

Country

USA

4. FEI Number

59-3612507

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Jonathan H. Green + Associates
799 Brickell Plaza
Suite 700
Miami, FL 33131

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
NAME
STREET ADDRESS
CITY-ST-ZIP
P/D
Rev. Ellsworth McIntyre
3590 23rd Ave SW
Naples, FL 34117 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S/D
Patricia McIntyre
3590 23rd Ave SW
Naples, FL 34117 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T/D
Fawn Harrison
4211 Cindy Ave
Naples, FL 34112 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Rev. Paul Edgar
103 Glenwood Ave
Dover, NH 03820 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Susan Edgar
103 Glenwood Ave
Dover, NH 03820 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Rev Thomas Clark
37 Lincoln St.
Somersworth, NH 03878 ☐ 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
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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:

E. H. McIntyre
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/01
Date

941-455-9900
Daytime Phone #

CR2E037 (11/00)

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2001 Uniform Business Report
Document # _____

Attachment
NA900007228
A0060871

- I. Dominion Charities, Inc.
- II. Title - D
Name - Yoland Clark
Address - 37 Lincoln St.
Somersworth, NH 03878