

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P29973

1. Entity Name

OKINAWA CHRISTIAN SCHOOL MISSION, A NEW JERSEY N

FILED
Feb 16, 2000 8:00 am
Secretary of State

02-16-2000 90038 018 ****61.25

Principal Place of Business

Mailing Address

1635 N.W. 7TH PLACE
GAINESVILLE FL 32603

1635 N.W. 7TH PLACE
GAINESVILLE FL 32603-1235

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

23-7057861

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
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)

City

FL

Zip Code

GRENINGER, ALTON R.
1635 N.W. 7TH PLACE
GAINESVILLE FL 32603

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **TILLAPPAUGH, TODD**
STREET ADDRESS **PSC 80 BOX 10859**
CITY-ST-ZIP **APO AP 96367-0859**

TITLE **D** ☐ Change ☒ Addition
NAME **MURRAY, MARTHA B.**
STREET ADDRESS **1438-1 Aza Maeda**
CITY-ST-ZIP **Urasoe City, Okinawa, Japan 901-2102**

TITLE **DT** ☒ Delete
NAME **KUHLMAN, BRUCE**
STREET ADDRESS **2-23-12 OYAMA**
CITY-ST-ZIP **GINOWAN CITY, JAPAN 901-2223**

TITLE **DT** ☐ Change ☒ Addition
NAME **TAGAMI, SHINICHI**
STREET ADDRESS **2-11-20 Kume**
CITY-ST-ZIP **Naha City, Okinawa, Japan 900-0033**

TITLE **DC** ☐ Delete
NAME **BROOKS, JAMES**
STREET ADDRESS **111 ONISHI TERRACE, KITANAKAGUSUKU-SON**
CITY-ST-ZIP **OKINAWA JA**

TITLE **D** ☐ Change ☒ Addition
NAME **BIADOG, M.A. DON JR.**
STREET ADDRESS **PSC 559, Box 5246**
CITY-ST-ZIP **FPO AP 96377-5246**

TITLE **D** ☐ Delete
NAME **OHASHI, CULLEN**
STREET ADDRESS **982 YOGI, #1280 AWASE, OKINAWA CITY**
CITY-ST-ZIP **OKINAWA, JAPAN 904-2127**

TITLE **D/VC** ☒ Change ☐ Addition
NAME **REASONER, JONATHAN**
STREET ADDRESS **1395-5 NS Mansion, NS-7**
CITY-ST-ZIP **Sobe, Yomitan, Okinawa, Japan 904-0304**

TITLE **D** ☒ Delete
NAME **MCDOWELL, MARC**
STREET ADDRESS **PSC 482 BOX 2774**
CITY-ST-ZIP **FPO AP 96362-2770**

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

TITLE **DS** ☒ Delete
NAME **FRANKLIN, ARDITH A**
STREET ADDRESS **2-27-2 OYAMA GINOWAN CITY**
CITY-ST-ZIP **OKINAWA, JAPAN 901-2223**

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:

CULLEN J. OHASHI
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 28, 2000 81-98-958-3000

Date

Daytime Phone #

CR2E037 (9/99)