

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2000 8:00 am
Secretary of State

02-14-2000 90010 048 ****61.25

DOCUMENT # P34622

1. Entity Name

PRESBYTERIAN CHURCH IN AMERICA FOUNDATION, INC.

Principal Place of Business

Mailing Address

1852 CENTURY PLACE, SUITE 180
 ATLANTA GA 30345

1852 CENTURY PLACE, SUITE 180
 ATLANTA GA 30345-4310

811653



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-1412526

Applied For

Not Applicable

Zip

Country

Zip

Country

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

OWENS, JEAN
13003 WATERFORD RUN DR.
RIVERVIEW FL 33569

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: ☐ Delete
 NAME: **P. STAIR, RANDEL N**
 STREET ADDRESS: **1852 CENTURY PLACE, STE 180**
 CITY-ST-ZIP: **ATLANTA GA 30345**

TITLE: ☐ Change ☒ Addition
 NAME: **Quarterman, Palmer L.**
 STREET ADDRESS: **139 Highland Circle**
 CITY-ST-ZIP: **Jackson, MS 39211**

TITLE: ☐ Delete
 NAME: **VCD RIORDAN, STANLEY J**
 STREET ADDRESS: **209 BLUE RIDGE VISTA**
 CITY-ST-ZIP: **ASHEVILLE NC 28805**

TITLE: ☒ Change ☐ Addition
 NAME: **VCD Riordan, Stanley J**
 STREET ADDRESS: **PO Box 5659**
 CITY-ST-ZIP: **Ashville, NC 28813**

TITLE: ☐ Delete
 NAME: **D BISHOP, HENRY G JR**
 STREET ADDRESS: **3040 SUMNTER AVE**
 CITY-ST-ZIP: **MONTGOMERY AL 36109**

TITLE: ☐ Change ☒ Addition
 NAME: **CD Frazer, Willis L.**
 STREET ADDRESS: **1023 Oakridge Rd.**
 CITY-ST-ZIP: **Clarksdale, MS 38614**

TITLE: ☐ Delete
 NAME: **D HASKEW, W D**
 STREET ADDRESS: **4854 SHADY WATERS LANE**
 CITY-ST-ZIP: **BIRMINGHAM AL 35243**

TITLE: ☐ Change ☒ Addition
 NAME: **D Jardine, John W.**
 STREET ADDRESS: **1963 Mitten St.**
 CITY-ST-ZIP: **Dover, DE 19901-6224**

TITLE: ☒ Delete
 NAME: **D EDWARDS, RICHARD M**
 STREET ADDRESS: **558 OAKBROOK DR.**
 CITY-ST-ZIP: **MARTINEZ GA 30907**

TITLE: ☐ Change ☒ Addition
 NAME: **D Harris, Mark W.**
 STREET ADDRESS: **3464 Boston Township Line Rd.**
 CITY-ST-ZIP: **Richmond, IN 47374**

TITLE: ☒ Delete
 NAME: **D LAWS, JOHN R**
 STREET ADDRESS: **2410 BRACKENSHIRE CIRCLE**
 CITY-ST-ZIP: **JACKSONVILLE FL 39236**

TITLE: ☐ Change ☒ Addition
 NAME: **DS. Albritton, John N.**
 STREET ADDRESS: **3112 Jamestown Rd.**
 CITY-ST-ZIP: **Montgomery, AL 36111**

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:

[Handwritten Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/9/00 404-320-3303