

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90121 004 ****61.25

DOCUMENT # 700302

1. Entity Name

THE NEW CHURCH AT BOYNTON BEACH INC.

Principal Place of Business

Mailing Address

10621 EL CLAIR RANCH RD
 BOYNTON BCH FL 33437
 US

10621 EL CLAIR RANCH RD
 BOYNTON BCH FL 33437-4203
 US

2. Principal Place of Business

3. Mailing Address

SAME

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

06-0116907

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

ELPHICK, DEREK P REV.
 10621 EL CLAIR RANCH RD.
 BOYNTON BEACH FL 33437

Name

SAME

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	CD	<input type="checkbox"/> Delete
NAME	ELPHICK, DEREK P REV.	
STREET ADDRESS	10621 EL CLAIR RANCH RD.	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	CHILDS, ALAN	
STREET ADDRESS	6711 N. OCEAN BLVD	
CITY-ST-ZIP	OCEAN RIDGE FL 33435	
TITLE	TD	<input type="checkbox"/> Delete
NAME	HORIGAN, PHILIP C	
STREET ADDRESS	12007 IGUANA BAY	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	HEINRICH, ROBERT	
STREET ADDRESS	5880 CORSON PL	
CITY-ST-ZIP	LAKE WORTH FL 33463	
TITLE	D	<input type="checkbox"/> Delete
NAME	SNOEP, JOHN	
STREET ADDRESS	15835 MEADOW WOOD DR	
CITY-ST-ZIP	WELLINGTON FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	SMITH, ROGER A.	
STREET ADDRESS	11006 HAITI BAY	
CITY-ST-ZIP	BOYNTON BEACH FL	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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)(l), 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PHILIP C. HORIGAN
 PHILIP C. HORIGAN (561) 736-9235
 4-27-00 Date Daytime Phone #

CR2E037 (9/99)