2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 18, 2000 8:00 am
Secretary of State
01-18-2000 90030 007 ****61.25

DOCUMENT # 701546

1. Entity Name

ORMOND BEACH UNION CHURCH, INC.

Principal Place of Business	Mailing Address
56 N BEACH ST ORMOND BEACH FL 32174-5638	56 N BEACH ST ORMOND BEACH FL 32174-5638

C0003744

DO NOT WRITE IN THIS SPACE

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 59-0915171 ☐ 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
SWEENEY, SHIRLEY 24 SILK OAKS DR ORMOND BEACH FL 32176	Name: Beville, Shirley Street Address (P.O. Box Number is Not Acceptable): 26 Woodland Blvd. City: Ormond Beach **FL** Zip Code 32174

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: Shirley Beville — 1/6/00

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 / STREET ADDRESS / CITY-ST-ZIP	P COLBY LEONA, 42 POLAR BEAR PATH ORMOND BEACH FL 32174-2948	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P May, Burt A. 2236 Kenilworth Ave. S. Daytona, FL 32119	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LILLY, ELENA 204 N. RIDGEWOOD AVE. ORMOND BEACH FL 32174	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Matthews, Alfred E. 11 Kings Grant Rd. #202 Holly Hill, FL 32117-2545	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SWEENEY EARL, 24 SILK OAKS DR ORMOND BEACH FL 32176-3123	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Mowl, Todd 99 Northbrook Lane Ormond Beach, FL 32174	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SWEENEY, SHIRLEY 24 SILK OAKS DR ORMOND BEACH FL 32176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Beville, Shirley 26 Woodland BBlvd. Ormond Beach, FL 32174	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOPST JANICE, 111 ELLICOTT DR. ORMOND BCH FL 32176-4136	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D APGAR WILLIAMS, 1600 S FLAGLER AVE FLGLER BEACH FL 32136-3808	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Bates, David 204 Ormond Parkway Ormond Beach, FL 32176-8123	☒ 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: [illegible] Alfred E. Matthews 01-05-00 904-677-3363

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #