## **2000 UNIFORM BUSINESS REPORT (UBR)**

## FILED DOCUMENT # 712105 Feb 28, 2000 8:00 am 1. Entity Name **Secretary of State** THE ASSOCIATE REFORMED PRESBYTERIAN CHURCH, INCO 02-28-2000 90014 037 \*\*\*\*61.25 Mailing Address Principal Place of Business 205 EAST STANFORD 205 EAST STANFORD P O BOX 1411 P O BOX 1411 BARTOW FL 33830-4640 BARTOW FL 33830 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-1464285 Not Applicable Country \$8.75 Additional Zip---5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ARRISON, WAYNE LONG, HAROLD W III 1680 EMERSON AVE BARTOW FL 33830 BARTOW 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 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. Delete Change ☐ Addition TITLE TITLE NAME HASTINGS, KEN HARRISON, STEVEN W NAME 2005. S. KISSENGEN AVE CR2E037 STREET ADDRESS STREET ADDRESS 5313 SERENTO CT BARTOW, FL 33830 CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33813 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME HOWLE, JOHN NAME STREET ADDRESS STREET ADDRESS 1803-IMPERIAL-BLVD. CITY-ST-ZIP CITY-ST-7IP BARTOW FL Change Delete Addition TITLE TITLE COOK, JAHKS NAME 1070 E. GEORGE ST SMITH, JUSTIN NAME STREET ADDRESS STREET ADDRESS 405 BARTOW BOULEVARD BARTOW, FL 33830 CITY-ST-ZIP CITY-ST-ZIP BARTOW FL 33830 Change ☐ Addition Delete TITLE LASSITER, STEVE HARRISON, WAYNE D NAME NAME 815 WILDWOOD DR STREET ADDRESS STREET ADDRESS 2110 HIGHLAND BLVD BARTOW, FL 33830 CITY-ST-ZIP CITY-ST-ZIP BARTOW FL 33830 Change ☐ Addition ☐ Delete TITLE WESTBERRY, PAUL NAME NAME STREET ADDRESS STREET ADDRESS 1105 HIBISCUS DR CITY-ST-ZIP CITY-ST-ZIP BARTOW FL 33830 Change Addition ☐ Delete TITLE BREED, JOHN H NAME NAME STREET ADDRESS STREET ADDRESS 6117 SWEET GUM RD CITY-ST-ZIP BARTOW FL 33830 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

other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF

changed, or on an attachmen