

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 28, 2001 8:00 am
Secretary of State

02-28-2001 90061 006 ****61.25

DOCUMENT # 751459

1. Entity Name

BROOKSVILLE CHURCH OF THE NAZARENE, INC.

Principal Place of Business

19384 INGRAM ROAD
BROOKSVILLE FL 34601

Mailing Address

19384 INGRAM ROAD
BROOKSVILLE FL 34601

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 59-1868691

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DRIER, ELDON
20015 RUTH ST
BROOKSVILLE FL 34601

7. Name and Address of New Registered Agent

Name

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

TITLE	DT	☐ Delete
NAME	DRIER, ELDON	
STREET ADDRESS	20015 RUTH ST	
CITY-ST-ZIP	BROOKSVILLE, FL 34601	
TITLE	P	☒ Delete
NAME	EBY, REV. M	
STREET ADDRESS	19384 INGRAM ST	
CITY-ST-ZIP	BROOKSVILLE FL	
TITLE	T	☒ Delete
NAME	WILDER, CARL	
STREET ADDRESS	5001 DETROIT ST	
CITY-ST-ZIP	SPRINGHILL FL	
TITLE	T	☒ Delete
NAME	BUTCHER, TROY	
STREET ADDRESS	27262 SOULT ROAD	
CITY-ST-ZIP	BROOKSVILLE FL	
TITLE	T	☐ Delete
NAME	THOMAS, CHARLES	
STREET ADDRESS	1152 MONROE AVE	
CITY-ST-ZIP	MASARYKTOWN FL Brooksville, FL 34602	
TITLE	S	☐ Delete
NAME	SNAKENBERG, LARRY	
STREET ADDRESS	12421 SNOWEY EGRET RD Ave	
CITY-ST-ZIP	WEEKI WACHEE FL 34614	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	T	☐ Change ☒ Addition
NAME	Stanfield, Ron	
STREET ADDRESS	26417 SOULT Rd.	
CITY-ST-ZIP	Brooksville, FL	
TITLE	P	☒ Change ☐ Addition
NAME	Legg, Charles, Rev.	
STREET ADDRESS	19384 Ingram St	
CITY-ST-ZIP	Brooksville, FL	
TITLE	T	☐ Change ☒ Addition
NAME	Meisberger, Norb	
STREET ADDRESS	6191 Lockhart Rd	
CITY-ST-ZIP	Brooksville, FL	
TITLE	T	☐ Change ☒ Addition
NAME	Smith, Robb	
STREET ADDRESS	2692 Colbreth Rd 308 West Ft Dade Ave	
CITY-ST-ZIP	Brooksville, FL	
TITLE	T	☐ Change ☒ Addition
NAME	Hughes, David	
STREET ADDRESS	2692 Colbreth Rd.	
CITY-ST-ZIP	Brooksville, FL	
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)