

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

0043873

DOCUMENT # 752799

1. Entity Name

FIRST CHURCH OF THE NAZARENE OF LARGO, INC.

04-09-2002 90038 025 ****61.25

Principal Place of Business

Mailing Address

C/O PHYLLIS HILTON
 610 2ND AVE NE
 LARGO FL 33770
 US

C/O PHYLLIS HILTON
 610 2ND AVE NE
 LARGO FL 33770
 US

2. Principal Place of Business

c/o Marilyn Thomas

3. Mailing Address

c/o Marilyn Thomas

Suite Apt. #, etc.

610 2nd Ave. N.E.

Suite Apt. #, etc.

610 2nd Ave. N.E.

City & State

Largo, Fl.

City & State

Largo, Fl.

4. FEI Number

59-6537860

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

PHYLLIS HILTON
 15001 HARDING AVE.
 CLEARWATER FL 34620

~~Name~~ **Marilyn Thomas**

~~Street Address (P.O. Box Number is Not Acceptable)~~
12100 Seminole Blvd. #179

~~City~~ **Largo**

FL 33778

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

Marilyn Thomas

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 **T** ☒ Delete
 NAME **MCUGHUGHY, RICH**
 STREET ADDRESS **1701 PALM WAY APT A.**
 CITY-ST-ZIP **LARGO FL**

TITLE **T** ☒ Change ☐ Addition
 NAME **Bill Gonyea**
 STREET ADDRESS **2098 Seminole Blvd.**
 CITY-ST-ZIP **Largo, Fl. 33778**

TITLE **T** ☒ Delete
 NAME **YOUNT, RON**
 STREET ADDRESS **305 WINDY DR**
 CITY-ST-ZIP **LARGO FL**

TITLE **T** ☒ Change ☐ Addition
 NAME **Keith Psaute**
 STREET ADDRESS **601 Rosery Rd. N.E. #804**
 CITY-ST-ZIP **Largo, Fl. 33770**

TITLE **CT** ☒ Delete
 NAME **HART, CHARLEY**
 STREET ADDRESS **926 VICTOR HERBERT DR.**
 CITY-ST-ZIP **LARGO FL**

TITLE **CT** ☐ Change ☐ Addition
 NAME **Richard Rambuski**
 STREET ADDRESS **692 Oakwood Dr.**
 CITY-ST-ZIP **Dunedin, Fl. 34698**

TITLE **T** ☒ Delete
 NAME **SPRING, BILL**
 STREET ADDRESS **1654 CLEARWATER-LARGO RD., #127**
 CITY-ST-ZIP **CLEARWATER FL**

TITLE **T** ☒ Change ☐ Addition
 NAME **Thurman McGuire**
 STREET ADDRESS **8421 56th St. N.**
 CITY-ST-ZIP **Pinellas Park, Fl 33782**

TITLE **T** ☐ Delete
 NAME **SUTTON, JOYCE A**
 STREET ADDRESS **9925 ULMERTON RD LOT 427**
 CITY-ST-ZIP **LARGO FL 33771 -4244**

TITLE **T** ☐ Change ☒ Addition
 NAME **Joyce Sutton**
 STREET ADDRESS **9925 Ulmerton Rd. #427**
 CITY-ST-ZIP **Largo, Fl. 33771-4244**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: **Marilyn Thomas**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

727-584-4571

Date

Daytime Phone #

CR2E037 (9/01)