

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000001134

1. Entity Name

NORTHWEST FLORIDA JURISDICTION CHURCH OF GOD IN

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90144 001 ****70.00

701550



DO NOT WRITE IN THIS SPACE

Principal Place of Business
212 S N STREET
PENSACOLA FL 32501

Mailing Address
212 S N STREET
PENSACOLA FL 32501-5135

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

NOT APPLICABLE

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

YOUNG, JOHN D SR
8346 SUNNY ACRE LANE
PENSACOLA FL 32514

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME YOUNG, JOHN D SR
STREET ADDRESS 8346 SUNNY ACRE LANE
CITY-ST-ZIP PENSACOLA FL 32514

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE SD
NAME SMITH, FREDERICK
STREET ADDRESS 1343 RULE STREET
CITY-ST-ZIP PENSACOLA FL 32534

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VD
NAME WALLACE, ODEST SR
STREET ADDRESS 5351 CASSIE LANE
CITY-ST-ZIP MILTON FL 32583

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE TD
NAME BRAGG, WILLIE J
STREET ADDRESS 2080 W. INTENDENCIA ST
CITY-ST-ZIP PENSACOLA FL 32501

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME STALLWORTH, STELLA
STREET ADDRESS 4250 PLEASANT DR
CITY-ST-ZIP PENSACOLA FL 32308

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-11-2000

CR2E037 (9/99)