

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 713738

1. Entity Name

SUWANNEE RIVER CHURCH OF THE NAZARENE, INC.

Principal Place of Business

Mailing Address

18763 SE C.R. 137
WHITE SPRINGS FL 32096

18763 C.R. 137
WHITE SPRINGS FL 32096
US

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

59-3192960

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

WHITE, WILLIAM A
18763 SE CO. RD. 137
WHITE SPRINGS FL 32096

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

William A. White

4/11/02

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
D
ERIXTON, LEE
9969 SE 142ND BLVD.
WHITE SPRINGS FL 32096 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
FOURAKER, MARTHA
8983 SE 150TH AVE
WHITE SPRINGS FL 32096 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
EDMONDS, SR H
14534 S E 87TH TERRACE
WHITE SPRINGS FL 32096 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Pearsall Fouraker
8983 S.E. 150th Ave.
White Springs, FL 32096 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ERIXTON, CATHY
18767 CO. ROAD 137
WHITE SPRINGS FL 32096 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
FOURAKER, MATTIE
9388 S E 154TH AVE
WHITE SPRINGS, FL 00000 32096 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BURROWS, SHIRLEY
10294 SE 160 LN
WHITE SPRINGS FL 32096 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Richard Fouraker
9388 S.E. 154th Ave.
White Springs, FL 32096 ☒ 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: *Mattie Fouraker*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/02

386-397-2922

Date

Daytime Phone #

CR2E037 (9/01)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90054 046 ****61.25



DO NOT WRITE IN THIS SPACE