

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 700313

1. Entity Name

FIRST CHRISTIAN CHURCH OF LAKE WORTH, INC.

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90058 034 ****61.25

Principal Place of Business

Mailing Address

301 N J ST
LAKE WORTH FL 33460

300 N DIXIE
LAKE WORTH FLA 33460-3364
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1521547

Applied For

Not Applicable

Zip

Country

Zip

Country

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

NUNAMAKER, TWYLAH
128 AKRON ST.
LAKE WORTH FL 39461

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 ☐ Delete
NAME TD
STREET ADDRESS MURPHY, LAVERA
CITY-ST-ZIP 2647 N GARDEN DR APT 301
LAKE WORTH FL 33461

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

TITLE ☐ Delete
NAME SD
STREET ADDRESS NUNAMAKER, TWYLAH
CITY-ST-ZIP 128 AKRON ST
LAKE WORTH FL 33461

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

TITLE ☐ Delete
NAME D
STREET ADDRESS WALTERS BERNICE
CITY-ST-ZIP 8562 LAWRENCE RD.
BOYNTON BCH., FL 33435

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

TITLE ☐ Delete
NAME T
STREET ADDRESS KROECK, EVA
CITY-ST-ZIP 207 S.E. 25TH AVE
BOYNTON BEACH FL 33435

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

TITLE ☐ Delete
NAME TD
STREET ADDRESS DYCUS VIOLA
CITY-ST-ZIP 277 N. COUNTRY CLUB DR.
ATLANTIS FL 3346-2

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

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:

Twyla N. Nunamaker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-16-2000

Date

Daytime Phone #

CR2E037 (9/99)