## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

## FILED Feb 29, 2000 8:00 am Secretary of State DOCUMENT # **704787** 1. Entity Name FELLOWSHIP BAPTIST CHURCH OF NEW PORT RICHEY. FL 02-29-2000 90098 004 \*\*\*\*70.00 Principal Place of Business Mailing Address 5940 MASSACHUSETTS AVE. 5940 MASSACHUSETTS AVE. NEW PORT RICHEY FL 34652-1815 NEW PORT RICHEY FL 34652 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2403844 Not Applicable \$8.75 Additional Zip Country Country X 5. Certificate of Status Desired Fee Required 6. .Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) GORDON, BARRY 5700 BAY BLVD PORT RICHEY FL 34668 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. П Added to Fees **Department of State** FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. Change ☐ Addition Delete TITLE TITLE Boone, wendy 5232 Marine Parkway PHILLIPS, DAVID NAME NAME STREET ADDRESS STREET ADDRESS 7930 KLANT CT sewfort Richey, F134652 CITY-ST-ZIP CITY-ST-ZIP NEW PORET RICHEY FL ☐ Addition Delete TITLE TITLE D mike Long NAME HICKS, JOE NAME 6941 Echo Lake Pr STREET ADDRESS STREET ADDRESS 5542 CHIPPER DR New PortRichey F1 34453 CITY-ST-ZIP CITY-ST-ZIP NEW PORT, RICHEY, FL ☐ Addition ☐ Delete ☐ Change TITLE TITLE NAME HICKS, LILA L NAME STREET ADDRESS STREET ADDRESS 5542 CHIPPER DR CITY-ST-ZIP CITY-ST-ZIP **NEW PORT RICHEY FL Change** ☐ Addition D ☐ Delete TITLE MILLS, STEVE NAME NAME 3176 Batten Rd STREET ADDRESS STREET ADDRESS 9465 LAKEVIEW DR. Brooksville FI 34602 CITY-ST-7IP CITY-ST-ZIP NEW PORT RICHEY FL 34654 ☐ Addition ☐ Delete TITLE BOONE, TIM NAME NAME 5232 marineParkway NewPortRichey, F134652 STREET ADDRESS STREET ADDRESS 7349 ALDERMAN LANE -CITY-ST-ZIP CITY-ST-ZIP **NEW PORT RICHEY FL** TITLE: TITLE ☐ Addition ☐ Delete NAME 4 GORDON, BARRY NAME STREET ADDRESS, STREET ADDRESS 5700 BAY BLVD :: CITY-ST-ZIP CITY-ST-ZIP PT RICHEY FL 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 feet.