

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 712839

1. Entity Name

NORTH PENINSULA BAPTIST CHURCH OF ORMOND BEACH,

Principal Place of Business

Mailing Address

/ORMOND BEACH FLA INC  
6 SANDRA DRIVE  
ORMOND BEACH FL 32176

/ORMOND BEACH FLA INC  
6 SANDRA DRIVE  
ORMOND BEACH FLA 32176-3121

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TRASCRITTI, MARIA T  
122 ESSEX DRIVE  
ORMOND BEACH FL 32176

Name STUART, WARREN A.  
Street Address (P.O. Box Number is Not Acceptable)  
250 OAK DRIVE

City ORMOND BEACH FL 32176

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 Warren A. Stuart, TREASURER

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE 1/4/2000

FILE NOW:  
FEE IS \$61.25

☐ 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 ☒ Delete  
NAME HAIGHT, GORDON  
STREET ADDRESS 39 MORNING STAR  
CITY-ST-ZIP ORMOND BEACH FL

TITLE PD ☐ Change ☐ Addition  
NAME COX, HOWARD  
STREET ADDRESS 128 BEAU RIVAGE  
CITY-ST-ZIP ORMOND BEACH, FL 32176

TITLE DVP ☒ Delete  
NAME COX, HOWARD  
STREET ADDRESS 124 BEAU RIVAGE  
CITY-ST-ZIP ORMOND BEACH FL

TITLE DVP ☐ Change ☐ Addition  
NAME HARRIS, WILLIAM  
STREET ADDRESS 26 JUNIPER DR.  
CITY-ST-ZIP ORMOND BEACH, FL 32176

TITLE SD ☐ Delete  
NAME HACKETT, JO ELLEN  
STREET ADDRESS 2390 OCEAN SHORE BLVD. #401  
CITY-ST-ZIP ORMOND BEACH FL

TITLE SD ☐ Change ☐ Addition  
NAME HARRIS, WILLIAM  
STREET ADDRESS 26 JUNIPER DR.  
CITY-ST-ZIP ORMOND BEACH, FL 32176

TITLE DAS ☒ Delete  
NAME HARRIS, WILLIAM  
STREET ADDRESS 26 JUNIPER DR  
CITY-ST-ZIP ORMOND BEACH FL

TITLE DAS ☐ Change ☐ Addition  
NAME OLIVER, ARTHUR  
STREET ADDRESS 30 WISTERIA DRIVE  
CITY-ST-ZIP ORMOND BEACH, FL 32176

TITLE T ☐ Delete  
NAME TRASCRITTI, MARIA T  
STREET ADDRESS 122 ESSEX DRIVE  
CITY-ST-ZIP ORMOND BCH FL

TITLE T ☐ Change ☐ Addition  
NAME STUART, WARREN A.  
STREET ADDRESS 250 OAK DRIVE  
CITY-ST-ZIP ORMOND BEACH, FL. 32176

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: Warren A. Stuart (Warren A. Stuart)

1/4/2000

904-441-2133

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)