2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State
03-13-2002 90119 043 ****61.25

DOCUMENT # 712839

1. Entity Name

NORTH PENINSULA BAPTIST CHURCH OF ORMOND BEACH, FLORIDA, INC.

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 FL 32176

DO NOT WRITE IN THIS SPACE

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 59-2941064 ☐ 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
STUART, WARREN A 250 OAK DRIVE ORMOND BEACH FL 32176	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP HARRIS, WILLIAM 26 JUNIPER DR. ORMOND BEACH FL 32176	☐ Delete	PD	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD COX, HOWARD 123 BEAR RIVAGE ORMOND BEACH FL	X ☐ Delete	DVP Arvesen, Roy 24 Sand Dollar Ormond Beach, FL 32176	☐ Change ☒ Addition X
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HACKETT, JO ELLEN 2390 OCEAN SHORE BLVD. #401 ORMOND BEACH FL	☐ Delete	32176	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DAS OLIVER, ARTHUR 30 WISTEASA DRIVE ORMOND BEACH FL 32176	☐ Delete	30 Wisteria Drive	☐ Change X ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T STUART, WARREN A 250 OAK DRIVE ORMOND BEACH FL 32176	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (9/01)

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 2/28/2002 (386)441-2133
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #