

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 716797

1. Entity Name

MONTE VISTA BAPTIST CHURCH, INC.

FILED
Mar 29, 2000 8:00 am
Secretary of State

03-29-2000 90036 042 ****61.25

Principal Place of Business

Mailing Address

11043 CEMETERY RD
CLERMONT FL 34711
US

11043 CEMETERY RD
CLERMONT FL 34711-8604
US

020209



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2871273

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

ASCHERMAN, TOM
11541 LAST CHANCE RD.
CLERMONT FL 34711

Name

RANDALL A. STORY

Street Address (P.O. Box Number is Not Acceptable)

1007 CHESTNUT ST.

City

CLERMONT

FL

Zip Code

34711

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 PD ☐ Delete
NAME TAYLOR, SCOTT
STREET ADDRESS 8021 LAKE NELLIE ROAD
CITY-ST-ZIP CLERMONT FL

TITLE ☐ Change ☒ Addition
NAME Kevin Pagan
STREET ADDRESS 9819 Hasson Ridge Rd.
CITY-ST-ZIP Clermont, FL 34711

TITLE V ☐ Delete
NAME BAUER, HEATH
STREET ADDRESS 203 ROYAL DRIVE
CITY-ST-ZIP OCOEE FL 34761

TITLE ☐ Change ☒ Addition
NAME Loyd Spence
STREET ADDRESS 10939 Crescent Lake Ct.
CITY-ST-ZIP Clermont, FL 34711

TITLE ☒ Delete
NAME ASCHERMAN, TOM
STREET ADDRESS 11541 LAST CHANCE ROAD
CITY-ST-ZIP CLERMONT FL 34711

TITLE ☒ Change ☐ Addition
NAME TREASURER
STREET ADDRESS RANDALL A. STORY
CITY-ST-ZIP 1007 CHESTNUT ST.
CLERMONT, FL 34711

TITLE S ☐ Delete
NAME STORY, LORI
STREET ADDRESS 1007 CHESTNUT ST.
CITY-ST-ZIP CLERMONT FL 34711

TITLE ☐ Change ☒ Addition
NAME Tony Hood
STREET ADDRESS 12838 Eryn Blvd.
CITY-ST-ZIP Clermont, FL 34711

TITLE ☒ Delete
NAME CHILDRESS, RUSSELL
STREET ADDRESS 14041 VISTA DEL LAGO BLVD.
CITY-ST-ZIP CLERMONT FL 34711

TITLE ☐ Change ☒ Addition
NAME Terry Stambaugh
STREET ADDRESS 11006 CR 561
CITY-ST-ZIP Clermont, FL 34711

TITLE ☐ Delete
NAME BRANNON, THAD
STREET ADDRESS 9954 SPRING LAKE DR.
CITY-ST-ZIP CLERMONT FL 34711

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RANDALL A. STORY, Treasurer 3/23/00

Date

Daytime Phone #

(352)

394-0708

CR2E037 (9/99)