

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 717308

1. Entity Name

GARDEN CITY CHURCH OF CHRIST, INC.

FILED

Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90215 004 ****70.00

Principal Place of Business

Mailing Address

2707 DUNBAR ST.
2611 AVENUE I
FT. PIERCE FL 34947
US

2707 DUNBAR ST.
FORT PIERCE FLA 34947

2. Principal Place of Business
2611 AVENUE I

3. Mailing Address
1402 AVENUE G

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
FORT PIERCE, FL

City & State
FORT PIERCE, FL

Zip
34947

Country
US

Zip

~~34947~~ 34950

Country
US

4. FEI Number

71-7308662

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

SIRMONS, NEAL C.
2707 DUNBAR ST.
FORT PIERCE FL 33450

Name Fred J. Sirmons, Sr.

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

1402 Avenue G

City Fort Pierce,

FL

Zip Code ~~34947~~ 34950

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 FRED J. SIRMONS, SR., TREASURER/DIRECTOR

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 D ☐ Delete
NAME JONES, ISAAC
STREET ADDRESS 3081 HAMMOND ROAD
CITY-ST-ZIP FORT PIERCE FL 34946

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

TITLE D ☐ Delete
NAME SIRMONS, FRED
STREET ADDRESS 1402 AVE G
CITY-ST-ZIP FORT PIERCE FL

TITLE ☒ Change ☐ Addition
NAME T/D SIRMONS, FRED J.
STREET ADDRESS 1402 AVENUE G
CITY-ST-ZIP FORT PIERCE, FL ~~34947~~ 34950

TITLE TD ☒ Delete
NAME SIRMONS, NEAL C
STREET ADDRESS 2707 DUNBAR ST
CITY-ST-ZIP FT. PIERCE FL

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

TITLE D ☐ Delete
NAME HARRIS, SAMMY SR
STREET ADDRESS 2802 AVENUE H
CITY-ST-ZIP FT PIERCE FL

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

TITLE SD ☐ Delete
NAME WORTHAM, WILLIE
STREET ADDRESS 3005 IROQUOIS AVE
CITY-ST-ZIP FT PIERCE FL

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

TITLE D ☐ Delete
NAME SIRMONS, JONAS W.
STREET ADDRESS 3128 SENECA AVE
CITY-ST-ZIP FORT PIERCE FL 34946

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 REQUIRED

FRED J. SIRMONS, SR. T/D

04/12/02

(772) 461-2492

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)