

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **723143** (4)

1. Corporation Name

**ASBURY UNITED METHODIST CHURCH OF NEW PORT RICHEY
Y, INC**



Principal Place of Business

**4204 THYS RD
NEW PORT RICHEY FL 34653**

Mailing Address

**4204 THYS RD
NEW PORT RICHEY FL 34653**

3. Date Incorporated or Qualified
04/12/1972

3a. Date of Last Report
02/21/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1502595

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SAYRE, ELEANOR M
12625 CHERRYDALE LN
HUDSON FL 34669**

81 Name

CHARLES E Babcock

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

4418 Barbara St

83

New Port Richey

84 City

FL

85 Zip Code

34652

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

CHARLES E Babcock

(NOTE: Registered Agent signature required when reinstating)

1/31/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☒ DELETE

NAME **EARL DAY**
STREET ADDRESS **3255 LAVERNE CT.**
CITY - ST - ZIP **NEW PORT RICHEY FL 34655**

1.1 TITLE **D** ☐ Change ☒ Addition

NAME **Robert Andrews**
STREET ADDRESS **8626 Woodbridge Dr**
CITY - ST - ZIP **New Port Richey FL 34655**

TITLE **D** ☒ DELETE

NAME **EDWARD REDMOND**
STREET ADDRESS **8846 GOSHEN LANE**
CITY - ST - ZIP **PORT RICHEY FL**

2.1 TITLE **Diana Blythe** ☐ Change ☒ Addition

NAME **Diana Blythe**
STREET ADDRESS **8761 Rio Dr**
CITY - ST - ZIP **New Port Richey 34652**

TITLE **D** ☒ DELETE

NAME **PAT TEMPLETON**
STREET ADDRESS **1917 OVERVIEW DR.**
CITY - ST - ZIP **NEW PORT RICHEY FL 34655**

3.1 TITLE **D** ☐ Change ☒ Addition

NAME **Elizabeth Emmons**
STREET ADDRESS **6040 2nd Ave.**
CITY - ST - ZIP **New Port Richey 34652**

TITLE **VD** ☐ DELETE

NAME **BABCOCK, CHARLES**
STREET ADDRESS **4418 BARBARA LANE**
CITY - ST - ZIP **NEW PORT RICHEY FL**

4.1 TITLE **D** ☐ Change ☒ Addition

NAME **Ohio Hess**
STREET ADDRESS **8217 Fish Hawk Ave.**
CITY - ST - ZIP **New Port Richey 34653**

TITLE **CD** ☒ DELETE

NAME **ELEANOR SAYRE**
STREET ADDRESS **12625 CHERRYDALE LANE**
CITY - ST - ZIP **HUDSON FL**

5.1 TITLE **D** ☐ Change ☒ Addition

NAME **Jack Velazquez**
STREET ADDRESS **9632 Cherry Tree Lane**
CITY - ST - ZIP **New Port Richey 34653**

TITLE **SD** ☒ DELETE

NAME **BIAGI, DEE DEE**
STREET ADDRESS **6751 ALBEMARLE PARKWAY**
CITY - ST - ZIP **NEW PORT RICHEY FL**

6.1 TITLE **800001746818** ☐ Change ☐ Addition

NAME **-03/18/96--01048--020**
STREET ADDRESS *****61.25**
CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Charles E Babcock** **CHARLES E Babcock** **1/31/96** **8138476604**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Day

Daytime Phone

CR2E037 (12/95)