

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90130 013 ****61.25

DOCUMENT # 723143

1. Entity Name
ASBURY UNITED METHODIST CHURCH OF NEW PORT
RICHEY, INC



Principal Place of Business
4204 THYS RD
NEW PORT RICHEY, FL 34653

Mailing Address
4204 THYS RD
NEW PORT RICHEY, FL 34653

40043514



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01112006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-1502595

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

ROLOSON, ADDIE F
3448 NIBLICK COURT
NEW PORT RICHEY, FL 34655

Name
Henry, Dale Jr.
Street Address (P.O. Box Number is Not Acceptable)
1206 Sweet Jasmine Drive
City
Trinity FL Zip Code
34655

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Henry, Dale Jr.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Delete
NAME MURRAY, JOAN
STREET ADDRESS 5123 GREENWOOD STREET
CITY-ST-ZIP NEW PORT RICHEY, FL 34653

TITLE P ☐ Change ☒ Addition
NAME Henry, Dale Jr.
STREET ADDRESS 1206 Sweet Jasmine Drive
CITY-ST-ZIP Trinity, FL 34653

TITLE D ☒ Delete
NAME LATSHAW, JOHN
STREET ADDRESS 5131 PIGEON PLUM CIRCLE
CITY-ST-ZIP NEW PORT RICHEY, FL 34655

TITLE D ☐ Change ☒ Addition
NAME Blekkenk, Jean
STREET ADDRESS 5340 Charlotte Avenue #204
CITY-ST-ZIP New Port Richey, FL 34652

TITLE D ☒ Delete
NAME MURRAY, WILLIAM
STREET ADDRESS 5132 GREEN WOOD STREET
CITY-ST-ZIP NEW PORT RICHEY, FL 34653

TITLE D ☐ Change ☒ Addition
NAME Graves, Elizabeth
STREET ADDRESS 7741 Waybury Street
CITY-ST-ZIP New Port Richey, FL 34653

TITLE P ☐ Delete
NAME ROLOSON, ADDIE F
STREET ADDRESS 3448 NIBLICK COURT
CITY-ST-ZIP NEW PORT RICHEY, FL 34655

TITLE S ☒ Change ☐ Addition
NAME Roloson, Addie F.
STREET ADDRESS 3448 Niblick Court
CITY-ST-ZIP New Port Richey, FL 34655

TITLE D ☐ Delete
NAME PETTIT, LEON
STREET ADDRESS 3407 TEESIDE DRIVE
CITY-ST-ZIP NEW PORT RICHEY, FL 34655

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

TITLE VP ☐ Delete
NAME ANDERSON, TED
STREET ADDRESS 5417 LEEWARD LANE
CITY-ST-ZIP NEW PORT RICHEY, FL 34652

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 exemptions contained in Chapter 119, 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:

Henry, Dale Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #