

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 725501

1. Entity Name

LARGO WESTSIDE CHURCH OF THE NAZARENE, INC.

Principal Place of Business

13650 WALSHINGHAM ROAD
LARGO FL 33774
US

Mailing Address

13650 WALSHINGHAM ROAD
LARGO FL 33774
US

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

59-6508234

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RIBORDY, BERNARD
9753 136TH ST NORTH
SEMINOLE FL 33776

7. Name and Address of New Registered Agent

Name

J. BRIAN CASEY

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

10415 HALLMARK BLVD.

City

RIVERVIEW

FL

Zip Code

33569

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

J. Brian Casey
J. BRIAN CASEY TREASURER

1/14/02

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

TITLE NAME ☐ Delete
D POWERS, HARDY III
STREET ADDRESS 7932 JAYWOOD LANE
CITY-ST-ZIP LARGO FL 33777

TITLE NAME ☐ Delete
D MCMILLIN, LYNETTE
STREET ADDRESS 7216 55TH AVE NORTH
CITY-ST-ZIP SAINT PETERSBURG FL 33709

TITLE NAME ☐ Delete
D SHARP, DIANNA
STREET ADDRESS 7607 91ST TERR NORTH
CITY-ST-ZIP SAINT PETERSBURG FL 33709

TITLE NAME ☐ Delete
I RIBORDY, BERNARD
STREET ADDRESS 10636 SEMINOLE FOREST ST. W.
CITY-ST-ZIP SEMINOLE FL

TITLE NAME ☒ Delete
P SAUNDERS, R.D.
STREET ADDRESS 13650 WALSHINGHAM RD
CITY-ST-ZIP LARGO FL 33774

TITLE NAME ☐ Delete
D MORGAN, RICKI
STREET ADDRESS 67 TURNSTONE DR
CITY-ST-ZIP SAFETY HARBOR FL 34695

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE NAME ☒ Change ☐ Addition
D RIBORDY, BERNARD
STREET ADDRESS 10636 FOREST ST W
CITY-ST-ZIP SEMINOLE FL 33776

TITLE NAME ☐ Change ☒ Addition
T J. BRIAN CASEY
STREET ADDRESS 10415 HALLMARK BLVD
CITY-ST-ZIP RIVERVIEW FL 33569

TITLE NAME ☐ Change ☐ Addition
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: J. BRIAN CASEY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jan 31, 2002 8:00 am
Secretary of State

01-31-2002 90013 047 *****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)