## 2001 UNIFORM BUSINESS REPORT (UBR)

## **FILED** May 01, 2001 8:00 am g Secretary of State **DOCUMENT # 740971** 1. Entity Name FIRST CHURCH OF THE NAZARENE, INC., VERO BEACH, 05-01-2001 90029 034 \*\*\*\*61.25 Principal Place of Business Mailing Address 1280 27TH AVE 1280 27TH AVE VERO BCH FL 32960 VERO BCH FL 32960 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1871618 Not Applicable \$8.75 Additional Country Zip Country Žip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) KING, REV HUBERT E 2676 12TH ST VERO BEACH FL 32960 Zip Code City 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. OFFICERS AND DIRECTORS 10. ☐ Addition ☐ Change TITLE Delete TITLE STRUMAS, DAN NAME NAME STREET ADDRESS 4502 SUNSET STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 0 CITY-ST-ZIP ☐ Change ☐ Addition PDC TITLE Delete TITLE KING, REV HUBERT E NAME NAME 2676 12TH ST STREET ADDRESS STREET ADDRESS VERO BEACH FL ---- ---CITY-ST-ZIP . . CITY\_ST-ZIP\_\_\_ ☐ Addition ☐ Change TITLE □ Delete TITLE KINCAID, TOM NAME NAME STREET ADDRESS 7703 SANTA CLARA BLVD STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP FT PIERCE FL ☐ Change X Addition TITLE M Delete TITLE Jamie Robison SAGE, JAY NAME NAME 1865 38th Avenue 2240 CORTEZ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH FL Vero Beach, FL 32960 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE MOON, DAVE NAME NAME STREET ADDRESS 6655 52ND AVE STREET ADDRESS CITY-ST-ZIP VERO BEACH FL CITY-ST-ZIP Change Addition Delete TITLE TITLE NAME

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 attachm ith an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-7IP

HUBERT E. KING 4/23/01 561-562-5904

Date Daytime Phone #