

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 30, 2001 8:00 am  
Secretary of State

04-30-2001 90352 045 \*\*\*\*61.25

DOCUMENT # 744094

1. Entity Name

PARKWAY CHURCH OF THE NAZARENE, INC.

Principal Place of Business

162 N. TYNDALL PKWY  
PANAMA CITY FL 32404

Mailing Address

162 N. TYNDALL PKWY  
PANAMA CITY FL 32404

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-6543226

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SANDRIDGE, BOBBIE  
309 S. BERTHE AVE.  
PANAMA CITY FL 32404

7. Name and Address of New Registered Agent

Name

JEFFREY E. NELSON

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

4010 OLD COTTONDALE ROAD

City

MARIANNA

FL

Zip Code

32448-7777

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

*Jeffrey E. Nelson* Jeffrey Nelson

4/23/01

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 STREET ADDRESS CITY-ST-ZIP	DT SANDRIDGE, BOBBIE 309 S. BERTHE AVE. PANAMA CITY FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GARY, GEORGE 2778-B DELTA AVE PANAMA CITY FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIERSCH, HAROLD L. 2325 HWY 231 PANAMA CITY FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NELSON, JEFFREY E. 4010 OLD COTTONDALE ROAD MARIANNA FL 32448	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Rodgers, Janet D. 4928 Tiger Trail Chipley FL 32428	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GIERSCH, HAROLD L. 2325 HWY 231 PANAMA CITY FL 32405	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

*Jeffrey E. Nelson* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/01

Date

(850) 718-1022

Daytime Phone #

CR2E037 (10/00)