

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90472 001 ****61.25
04-23-2002 90472 002 *****8.75

DOCUMENT # 746420

1. Entity Name

TWENTY-SEVENTH AVENUE CHURCH OF CHRIST, INC.

Principal Place of Business

Mailing Address

514 S W 27TH AVENUE
POST OFFICE BOX 6146
OCALA FL 32678-3146

27TH AVE CHURCH OF CHRIST
P O BOX 6146
OCALA FL 34478-6146
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

05-0030720

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

CARTER, VERLON L
1401 N.W. 19TH AVENUE
OCALA FL 34475

Name

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

City

FL

Zip Code

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

Verlon Carter

4-8-02

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME JACKSON, JOHN W
STREET ADDRESS 10120 NW HWY 318
CITY-ST-ZIP REDDICK FL

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

TITLE D ☒ Delete
NAME BREWTON, DAVID N SR
STREET ADDRESS 521 SILVERWAY DRIVE
CITY-ST-ZIP Ocala FL 34472 *Delete*

TITLE ☒ Change ☒ Addition
NAME Gary, Lamar
STREET ADDRESS 8996 SE 90th Avenue Rd.
CITY-ST-ZIP Ocala FL 34472

TITLE PD ☐ Delete
NAME JAMES, RICHARD RAY
STREET ADDRESS 2822 N.E. 4TH COURT
CITY-ST-ZIP Ocala FL

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

TITLE TD ☐ Delete
NAME LINDSEY, ALPHONSO
STREET ADDRESS 7 BROOK LANE
CITY-ST-ZIP Ocala FL

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

TITLE D ☐ Delete
NAME LEE, JOE L
STREET ADDRESS 516 SW 27 AVE
CITY-ST-ZIP Ocala FL

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

TITLE D ☐ Delete
NAME BREWTON, TONY
STREET ADDRESS 2836 N.E. 8TH TERRACE
CITY-ST-ZIP Ocala FL

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 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:

Verlon Carter

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-8-02

CR2E037 (9/01)