

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2001 8:00 am
Secretary of State

02-26-2001 90535 043 ****61.25

DOCUMENT # 747200

1. Entity Name

IMMANUEL LUTHERAN CHURCH OF NEW PORT RICHEY, INC ✓

Principal Place of Business

8410 SYCAMORE DR
NEW PORT RICHEY FL 34654

Mailing Address

8410 SYCAMORE DR
NEW PORT RICHEY FL 34654

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

59-2256367

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

VALIENTE, VERONICA
8946 STERLING LANE
NEW PORT RICHEY FL 34668

7. Name and Address of New Registered Agent

Name BECWAR, David

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

7340 America way

City New Port Richey FL FL

Zip Code 34654

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

David W Becwar Dubecwar 2/5/2001

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 PD Delete
NAME WEBB, WILLIAM
STREET ADDRESS 8600 CESSNA RD
CITY-ST-ZIP NEW PORT RICHEY FL 34654

TITLE VD Delete
NAME BECWAR, DAVID
STREET ADDRESS 7340 AMERICA WAY
CITY-ST-ZIP NEW PORT RICHEY FL 34654

TITLE SD Delete
NAME RASMUSSEN, VIRGINIA
STREET ADDRESS 9331 DANTEL DR.
CITY-ST-ZIP NEW PORT RICHEY FL 34654

TITLE TD Delete
NAME VALIENTE, VERONICA
STREET ADDRESS 8646 STERLING LANE
CITY-ST-ZIP NEW PORT RICHEY FL 34668

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD Change Addition
NAME BECWAR, DAVID
STREET ADDRESS 7340 AMERICA WAY
CITY-ST-ZIP NEW PORT RICHEY, FL. 34654

TITLE VD Change Addition
NAME ASHTON, RAY
STREET ADDRESS 9302 BEARCAT RD
CITY-ST-ZIP NEW PORT RICHEY, FL. 34655

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD Change Addition
NAME DEALTEGRAFF, JEANNE
STREET ADDRESS 7608 SEQUOIA DR
CITY-ST-ZIP NEW PORT RICHEY, FL. 34653

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 empowerments.

SIGNATURE:

David W Becwar

2/5/2001

727 8416107

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)