

2001 UNIFORM BUSINESS REPORT (UBR)

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

07-12-2001 90112 013 ****61.25

DOCUMENT # 754365

1. Entity Name

THE ARCADIA FIRST CHURCH OF THE NAZARENE, INC.

(Handwritten initials)

Principal Place of Business

**132 WEST GIBSON STREET
 ARCADIA FL 34266
 US**

Mailing Address

**132 WEST GIBSON STREET
 ARCADIA FL 34266
 US**

A0076836



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-0954124

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**DEWEESE, HERBERT
 1885 NE VOSS OAKS CIRCLE
 ARCADIA FL 34266**

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

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
 After September 12, 2001, min. will be \$236.25**

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 NAME STREET ADDRESS CITY-ST-ZIP	P CRIMMINS, KEVINS C SR 523 CLARK LANE ARCADIA FL 34266	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BORDNER, GARYU 4925 NW DILL AVE, P.O. BOX 1708 ARCADIA FL 34266	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, DONNA 1712 PEAR ST ARCADIA FL 34266	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALDRON, DAISY 1278 SE LAKE RD ARCADIA FL 34266	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, ELIZABETH 1722 N.E. TRISHA AVE. ARCADIA FL 34266	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARBARA, MAICK 5097 NW DILL RD ARCADIA FL 34266	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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D
Carlas Palmer
1751 NE Mike St.
Arcadia, FL 34266

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

(Handwritten signature: Herbert L. Dewese 7-7-2001 (863) 491-5414)

CR2E037 (5/01)