2000 UNIFORM BUSINESS REPORT (UBR)

Mar 23, 2000 8:00 am Secretary of State DOCUMENT # **766771** 1. Entity Name PORT RICHEY TRINITY CHURCH OF THE NAZARENE INC. 03-23-2000 90030 010 ****61.25 Principal Place of Business Mailing Address 11038 LITTLE RD 11038 LITTLE RD NEW PORT RICHEY FL 34654-2516 **NEW PORT RICHEY FL 34654** OWUWUI 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1699970 Not Applicable Zip Country Zip Country \$8.75 Additional 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) REED, DARYL L 7917 KELPIE DR PORT RICHEY FL 34668 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, typed or printed name of registr 9. Election Campaign Financing Make Check Pavable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. **PAST** ☐ Change Addition TITLE TITLE ☐ Delete REED, DARYL L NAME NAME STREET ADDRESS 7335 ABALONE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PORT RICHEY FL Addition TITLE **Delete** TITLE Change Naomi wifert 5326 Avery Rd NAME DOUGLAS, MAE NAME STREET ADDRESS STREET ADDRESS 6046 EASY DR New Port Richer Fl 34652 CITY-ST-ZIP CITY-ST-ZIP PORT RICHEY FL 34668 ☐ Addition Delete TITLE ☐ Change TITLE, _ -WIPERT, RICHARD NAME NAME 9604 Star Trail STREET ADDRESS 5326 AVERY RD STREET ADDRESS F134654 Port Racher CITY-ST-ZIP CITY-ST-ZIP NEW PORT RICHEY FL TITLE ☐ Delete ☐ Change ☐ Addition BROCK, TOM NAME STREET ADDRESS STREET ADDRESS 6825 MESA VERDE CITY-ST-ZIP CITY-ST-ZIP PORT RICHEY FL 34668 ☐ Delete TITLE ☐ Change Addition TITLE NAME DAVIS, GAYLE NAME STREET ADDRESS STREET ADDRESS 7425 GIMBAL LN CITY-ST-ZIP CITY-ST-ZIP **NEW PORT RICHEY FL 34653** Change | ☐ Addition TITLE TITLE Delete HARDIN, FRANCES NAME NAME 3625 SPRING VALLEY DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEW PORT RICHEY FL 34655** 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 eath; 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

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