

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000003076

1. Entity Name

NASHVILLE INNER CITY MINISTRY, INC.

Principal Place of Business

185 ANTHES DR.
NASHVILLE TN 37210

Mailing Address

185 ANTHES DR.
NASHVILLE TN 37210

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

58-1519894

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NATIONSCORP REGISTERED AGENTS, INC.
526 E. PARK AVE.
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

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

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 C
NAME STEVENS, TURNEY
STREET ADDRESS 2416 MCINTYRE COURT
CITY-ST-ZIP FRANKLIN TN 37069 ☐ Delete

TITLE PD
NAME YATES, OLIVER
STREET ADDRESS 5214 MEADOW LAKE RD.
CITY-ST-ZIP BRENTWOOD TN 37027 ☐ Delete

TITLE S
NAME CATES, PAUL
STREET ADDRESS 8223 HALFORD PL.
CITY-ST-ZIP BRENTWOOD TN 37027 ☐ Delete

TITLE T
NAME LOCKE, PAUL
STREET ADDRESS 6575 MANLEY LN.
CITY-ST-ZIP BRENTWOOD TN 37027 ☐ Delete

TITLE BM
NAME BORNSTE, JOHN
STREET ADDRESS 6316 WILDWOOD VALLEY DRIVE
CITY-ST-ZIP BRENTWOOD TN 37027 ☐ Delete

TITLE BM
NAME EZELL, STAN
STREET ADDRESS 946 JUNE BLVD
CITY-ST-ZIP NASHVILLE TN 37220 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

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

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 946 Tyne Blvd.
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90012 005 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)