

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2001 8:00 am
Secretary of State

01-23-2001 90004 027 ****70.00

DOCUMENT # NO1068

1. Entity Name

HIGHLAND PARK CHURCH OF THE NAZARENE, INC.

Principal Place of Business

Mailing Address

**4777 LAKELAND HIGHLANDS RD
 LAKELAND FL 33813
 US**

**4777 LAKELAND HIGHLANDS R
 LAKELAND FL 33813
 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

59-0838102

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

7. Name and Address of New Registered Agent

**MARSHALL, JAMES T
 4777 LAKELAND HIGHLANDS ROAD
 LAKELAND FL 33813**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	PD DENNIS, LARRY D.	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	4777 LKLAND HIGHLAND RD	
CITY-ST-ZIP	LAKELAND FL	
TITLE NAME	SD WILLISON, MICHAEL H	<input type="checkbox"/> Delete
STREET ADDRESS	4777-LAKELAND HIGHLANDS ROAD	
CITY-ST-ZIP	LAKELAND FL	
TITLE NAME	TD MARSHALL, JAMES T.	<input type="checkbox"/> Delete
STREET ADDRESS	4777 LKLAND HIGHLAND RD	
CITY-ST-ZIP	LAKELAND FL	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

TITLE NAME	Pastor (President) Leonard, Larry W.	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	4777 Lakeland Highlands Rd	
CITY-ST-ZIP	Lakeland, FL 33813	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 an other like empowered.

SIGNATURE:

Signature
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/00

(863) 647-3518

Date

Daytime Phone #

CR2E037 (10/00)