

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 09, 2003 8:00 am**  
**Secretary of State**

01-09-2003 90036 019 \*\*\*\*70.00

**DOCUMENT # N02000005624**

1. Entity Name

**NEW SONG CHURCH OF SPRING HILL INC.**



Principal Place of Business

**4244 MARINER BLVD  
SPRING HILL FL 34609**

Mailing Address

**PO BOX 3884  
SPRING HILL FL 34611-3884**

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 **37-1436885**

Applied For

Not Applicable

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

**JEREZ, HERIBERTO REV.  
7027 BRICKELL CT.  
SPRING HILL FL 34609**

Name **Rev. Heriberto Jerez**

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

**4322 Goldcoast ave.**

City **Spring Hill**

FL

Zip Code

**34609**

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. I am familiar with, and accept the obligations of registered agent.

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME **P/D Heriberto Jerez** ☐ Delete  
STREET ADDRESS **4322 Goldcoast ave.**  
CITY-ST-ZIP **Spring Hill FL 34609**

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

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME **Charles C. Poole** ☐ Change ☒ Addition  
STREET ADDRESS **5260 Hanford ave**  
CITY-ST-ZIP **Spring Hill FL 34608**

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME **Arnaldo Rivera (T)** ☐ Change ☒ Addition  
STREET ADDRESS **3357 Milligan St.**  
CITY-ST-ZIP **Spring Hill FL 34606**

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ 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 all other like empowered.

SIGNATURE:

**Rev. Heriberto Jerez** 1/6/03 (352) 346-2693

CR2E037 (10/02)