

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N20461

1. Entity Name

WESTSIDE CHURCH OF CHRIST OF PENSACOLA, INC.

FILED

Mar 07, 2002 8:00 am
Secretary of State

03-07-2002 90035 002 ****61.25

Principal Place of Business

Mailing Address

900 N. "J" ST.
P.O. BOX 17855
PENSACOLA FL 32501

900 N. "J" ST.
P.O. BOX 17855
PENSACOLA FL 32522-7855
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

59-2804609

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

SHAW, JERRY
718 WHITNEY DRIVE
PENSACOLA FL 32503

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
STREET ADDRESS
CITY-ST-ZIP
PCD
SCOTT, HENRY J SR
4401 DEAUVILLE WAY
PENSACOLA FL 32505-3005 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCD
oliver, Marquette
2703 Massachusetts Ave #120
Pensacola, FL 32505 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
OWENS, WILTON
1303 E HAYES ST
PENSACOLA FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
GOLDSMITH, DAVID
7584 HOWARD DEAU LANE
PENSACOLA FL 32526 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T. Allen mcgee
Pensacola
7869 Lenora Ct FLA 32502 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SOLES, JULIUS
7830 REGIMENT AVENUE
PENSACOLA FL 32534 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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: Wilton Owens
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-24-2 (850) 434-6763
Date Daytime Phone #

CR2E037 (9/01)