

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N21427

1. Entity Name

NEW HORIZON MISSIONARY CHURCH, INC.

Principal Place of Business

484 EMERALD RD  
OCALA FL 34472  
US

Mailing Address

PO BOX 830206  
OCALA FL 34483-0206  
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2836965

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

GILBERT, BONILLA  
PO BOX 830206  
#1 HEMLOCK TERR CT  
OCALA FL 34483

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 DD ☐ Delete  
NAME BONILLA, GILBERT  
STREET ADDRESS #1 HEMLOCK TERRACE COURT  
CITY-ST-ZIP Ocala FL 34472

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

TITLE TD ☐ Delete  
NAME LOPEZ, GILBERT  
STREET ADDRESS 3 HEMLOCK LOOP TRL  
CITY-ST-ZIP Ocala FL 34472

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

TITLE S ☐ Delete  
NAME COLON, CARMEN L  
STREET ADDRESS 2916 NE 24TH AVE  
CITY-ST-ZIP Ocala FL 34479

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

TITLE TR ☒ Delete  
NAME BONILLA, ANA  
STREET ADDRESS #1 HEMLOCK TERR CT  
CITY-ST-ZIP Ocala FL 34472

TITLE ☒ Change ☐ Addition  
NAME O'Neill, Marisol  
STREET ADDRESS 3 Hemlock Loop Trail  
CITY-ST-ZIP Ocala, FL 34472

TITLE TR ☐ Delete  
NAME FRET, JAMIE L  
STREET ADDRESS 8740 SE 60TH AVE  
CITY-ST-ZIP Ocala FL 34472

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
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:

*Marisol O'Neill*

April 25 2001

FILED  
May 17, 2001 8:00 am  
Secretary of State

05-17-2001 91079 027 \*\*\*\*61.25

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DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)