

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N25706

1. Entity Name

FIRST CHURCH OF GOD, OF BROOKSVILLE, FLORIDA, IN

Principal Place of Business

20053 YONTZ ROAD  
BROOKSVILLE FL 34601

Mailing Address

20053 YONTZ ROAD  
BROOKSVILLE FL 34601-1664

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

59-2359130

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BOYETT, SHERRY L REV  
20053 YONTZ RD  
BROOKSVILLE FL 34601

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

April 26, 2000

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 D ☐ Delete  
NAME BOYETT, SHERRY L REV  
STREET ADDRESS 20053 YONTZ RD  
CITY-ST-ZIP BROOKSVILLE FL

TITLE DS ☐ Delete  
NAME GREIDER, BETTY  
STREET ADDRESS 26033 HECKMAN DR  
CITY-ST-ZIP BROOKSVILLE FL 34601

TITLE DT ☒ Delete  
NAME MCQUEEN, JOYCE  
STREET ADDRESS 24141 MONDON HILL RD  
CITY-ST-ZIP BROOKSVILLE FL 34601

TITLE D ☒ Delete  
NAME WILLIE M BALLARD  
STREET ADDRESS 26343 ROLLING ACRES DR  
CITY-ST-ZIP BROOKSVILLE FL 34602

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 DT ☒ Change ☐ Addition  
NAME Willie M. Ballard  
STREET ADDRESS 26343 Rolling Acres Drive  
CITY-ST-ZIP Brooksville, FL 34602

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

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 of Registered Agent*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 26, 2000

Date

(352) 746-9044

Daytime Phone #

CR2E037 (9/99)