

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 05, 2001 8:00 am
Secretary of State

04-05-2001 90065 010 ****61.25

DOCUMENT # N26529

1. Entity Name

PORT ST. JOHN FAITH CHURCH OF THE NAZARENE, INC.

Principal Place of Business

**3860 OAKLAND ST.
COCOA FL 32927**

Mailing Address

**3860 OAKLAND ST.
COCOA FL 32927**

9 3 9 2 9 1



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2600634

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**LORD, J. RICHARD, SR.
3860 OAKLAND ST.
COCOA FL 32927**

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
**PD
LORD, J. RICHARD, SR.
3860 OAKLAND ST.
COCOA FL** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
GENTNER, BETTY
601 SHOREWOOD DR #302
CAPE CANAVERAL FL** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
Mrs. Dorothy Morgan
1188 Aron St.
Cocoa, FL. 32927** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
LORD, VIRGINIA A.
3860 OAKLAND ST.
COCOA FL** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GENTNER, RALPH
601 SHOREWOOD DR #302
CAPE CANAVERAL FL** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Eric Liming
4250 Ponds
Cocoa, FL. 32927** ☒ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

J. Richard Lord, Sr. **JOSEPH RICHARD LORD, SR.** 4/2/01 321-639-0674

CR2E037 (10/00)