

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N26532

1. Entity Name

SEBASTIAN FIRST CHURCH OF THE NAZARENE, INC.

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

02-05-2001 90081 042 ****61.25

Principal Place of Business

50 S. WIMBROW DR.
SEBASTIAN FL 32958

Mailing Address

50 S. WIMBROW DR.
SEBASTIAN FL 32958

2. Principal Place of Business

50 S Wimbrow Dr
Suite, Apt. #, etc.

3. Mailing Address

50 S Wimbrow Dr.
Suite, Apt. #, etc.

City & State

Sebastian, Florida

City & State

Sebastian, Florida

Zip

32958

Country

U.S.A.

Zip

32958

Country

U.S.A.

4. FEI Number

65-0056895

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LYLE, MICHAEL E
421 GEORGIA BLVD.
SEBASTIAN FL 32958

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

Michael Lyle

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-3-2001

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

TITLE P
NAME LYLE, MICHAEL E
STREET ADDRESS 421 GEORGIA BLVD
CITY-ST-ZIP SEBASTIAN FL ☐ Delete

TITLE T
NAME SUMMERS, CAROL A.
STREET ADDRESS 865 GEORGE ST
CITY-ST-ZIP SEBASTIAN FL ☐ Delete

TITLE S
NAME SUMMERS, CAROL A
STREET ADDRESS 865 GEORGE ST
CITY-ST-ZIP SEBASTIAN FL ☐ Delete

TITLE D
NAME GEHRKE, RONALD
STREET ADDRESS 101 INDIAN AVE
CITY-ST-ZIP SEBASTIAN FL 32958 ☐ Delete

TITLE D
NAME TRAVIS, KEN
STREET ADDRESS 766 CARNATION DR
CITY-ST-ZIP SEBASTIAN FL 32958 ☐ Delete

TITLE D
NAME COGSWELL, MARY
STREET ADDRESS 471 SEAGRASS
CITY-ST-ZIP SEBASTIAN FL 32958 ☐ Delete

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 ☒ Change ☐ Addition
NAME Lois Schleicher
STREET ADDRESS 468 Seagrass Ave.
CITY-ST-ZIP Sebastian, FL 32958

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

TITLE ☒ Change ☐ Addition
NAME Austin Scott
STREET ADDRESS 845 George St.
CITY-ST-ZIP Sebastian, FL 32958

TITLE ☒ Change ☐ Addition
NAME Janet Holland
STREET ADDRESS 8045 96th Ct.
CITY-ST-ZIP Vero Beach, FL 32967

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:

Michael Lyle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-3-2001

Date

Daytime Phone #

CR2E037 (10/00)