

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N29851

1. Entity Name

OCALA WEST UNITED METHODIST CHURCH, INC.

Principal Place of Business

9330 S.W. 105TH STREET
OCALA FL 34481

Mailing Address

9330 S.W. 105TH STREET
OCALA FL 34481

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

LOOMIS, HAROLD R
6692 SW 111TH LOOP
OCALA FL 34476

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

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 NAME STREET ADDRESS CITY-ST-ZIP	DP LOOMIS, HAROLD R 6692 SW 111TH LOOP OCALA FL 34476	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS ZAORSKI, LINDA 11628 SW 75TH CIRCLE OCALA FL 34476	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV VAN FLEET, JOHN 10101 SW 73RD CT OCALA FL 34476	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FITZGERALD, WILLARD 8079 SW 116TH LOOP OCALA FL 34481	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOTTMAN, HERB 8709-B SW 96TH ST OCALA FL 34481	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BONOMO, MELVIN 6483 SW 107TH PL OCALA FL 34476	☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Horne, Jean 8880-B SW 94th St. Ocala, Fl. 34481	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Blair, Donald 7750 SW 114th Loop Ocala, Fl. 34476	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Keller, Robert 8878-A SW 90th Lane Ocala, Fl. 34481	☐ 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 #

FILED
Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90049 041 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)