

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N43922

1. Entity Name

NORTH SUMTER MINISTERIAL ASSOCIATION, INC.

**FILED**  
**Jan 13, 2000 8:00 am**  
**Secretary of State**

01-13-2000 90015 025 \*\*\*\*61.25

Principal Place of Business

Mailing Address

4060 CR 108  
OXFORD FL 34484  
US

P O BOX 413  
WILDWOOD FL 34785-0413  
US

2. Principal Place of Business

3. Mailing Address

1501 AKRON DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
LEESBURG FLORIDA

City & State

4. FEI Number

59-3102499

Applied For

Not Applicable

Zip  
34748

Country  
U.S.

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

THORNTON, RANDALL N.  
2008 N C-470  
LAKE PANASOFFKEE FL 33538

Name  
Richard J Clark

Street Address (P.O. Box Number is Not Acceptable)

15202 Milton Ave

City  
Brooksville

FL

Zip Code  
34609

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 RICHARD J. CLARK Richard J Clark 1/6/2000  
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  
S  
ADAMS, AARON  
3723 CR 657  
WEBSTER FL 33597 ☒ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
REED, MIKE  
2115 CENTRAL AVE  
COLEMAN FL 33521 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
CLARK, RICHARD J.  
3844 CR 230  
WILDWOOD FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TSP  
15202 Milton Ave  
BROOKSVILLE FL 34609 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
BRACK, BILL  
7509 CR 629  
BUSHNELL FL 33513 ☒ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
PARKER, DANIEL  
1308 CLEVELAND AVENUE  
WILDWOOD FL 34785 ☐ 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  
DV  
RAY, WILEY  
94 MARKEE SV.  
CENTER HILL FL 33514 ☐ 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: RICHARD J CLARK Richard J Clark 1/6/2000 352  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #