

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2002 8:00 am
Secretary of State

02-28-2002 90061 044 ****61.25

DOCUMENT # N50243

1. Entity Name

HOWEY-IN-THE-HILLS COMMUNITY CHURCH, FLORIDA CORPORATION

Principal Place of Business

**420 NORTH PALM AVENUE
 HOWEY-IN-THE-HILLS FL 34737**

Mailing Address

**420 NORTH PALM AVENUE
 HOWEY-IN-THE-HILLS FL 34737**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1117563

Applied For

Not Applicable

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

**REMINGTON, ED
 125 EAST OAK STREET
 HOWEY-IN-THE-HILLS FL 34737**

*119 Hibiscus Way
 Leesburg, FL 34748*

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	D MERRELL, ROBERT 4144 BAIR AVE FRUITLAND PARK FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD REMINGTON, ED 125 E. OAK ST. HOWEY FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CROWDER, DANIEL 12106 BRUCE HUNT RD CLERMONT FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T METZ, LARRY 8205 CONWAY RD HOWEY IN THE HILLS FL 34737	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHILDS, LYNDA 407 E. ORCHID WAY HOWEY-IN-THE-HILLS FL 34737	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>119 Hibiscus Way Leesburg, FL 34748</i>	☒ 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	<i>Leslie Manning 111 E. Holly Ave Howey-in-the-Hills, FL 34737</i>	☐ Change ☒ Addition
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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/11/02

Date

(352) 324-2639

Daytime Phone #

CR2E037 (9/01)