

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000000308

1. Entity Name

SAN MATEO FIRST CHURCH OF THE NAZARENE, INC.

FILED
Apr 05, 2000 8:00 am
Secretary of State

04-05-2000 90052 029 ****61.25

Principal Place of Business
496 S HIGHWAY 17 S
SAN MATEO FL 32187

Mailing Address
PO BOX 1268
SAN MATEO FL 32187-1268

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2383652

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

TROY A. KNUDSEN
496 S. HWY. 17
SAN MATEO FL 32187

Name

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

City

San Mateo

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

T
FAKE, ERNIE
802 SQUIRREL TREE TRAIL
SATSUMA FL 32189

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
SMITH, BLANCH
211 CLEARWATER
SATSUMA FL 32189

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
Beard, Blanch
211 Clearwater
Satsuma, FL 32189

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

ST
CYNTHIA KNUDSEN
496 S. HIGHWAY 17S
SAN MATEO FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
Cynthia Knudsen
Same as block 10

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
POULIN, EDITH
213 CLEARWATER RD
SATSUMA FL 32189

☐ 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

S
Anna Fake
802 Squirrel Tree Trail
Satsuma, FL 32189

☐ 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: Cynthia Knudsen, treasurer 3/31/2000 (904) 328-0595

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)