

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000000481

1. Entity Name

APOLLO BEACH COMMUNITY CHURCH, INC.

FILED
Mar 23, 2000 8:00 am
Secretary of State

03-23-2000 90030 012 ****61.25

Principal Place of Business

6414 GOLF & SEA BLVD.
PO BOX 3781
APOLLO BEACH FL 33572

Mailing Address

6414 GOLF & SEA BLVD.
PO BOX 3781
APOLLO BEACH FL 33572-3781

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

59-3210482

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

WILLIAM K. WALLINGFORD
308 2ND ST. NW
RUSKIN FL 33572

Name SAME

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

501 FIREFLY LANE

City APOLLO BEACH, FL

FL

Zip Code
33572

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.

(CHANGE OF ADDRESS)

SIGNATURE

WILLIAM K. WALLINGFORD (AGENT) William K Wallingford

3/15/2000

DATE

FILE NOW:
FEES 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 PD ☒ Delete
NAME WARNER, GEORGE
STREET ADDRESS 302-2ND AVE. S.E.
CITY-ST-ZIP RUSKIN FL 33570

TITLE PD ☒ Change ☐ Addition
NAME Frank, Joseph
STREET ADDRESS 741 Flamingo DR
CITY-ST-ZIP Apollo Beach, FL 33572

TITLE D ☐ Delete
NAME WAY, TIMOTHY S.
STREET ADDRESS 1007 RIVER DR.
CITY-ST-ZIP RUSKIN FL 33570

TITLE D ☒ Change ☐ Addition
NAME Warner, George
STREET ADDRESS 302 2nd Ave S.E.
CITY-ST-ZIP Ruskin, FL 33570

TITLE P ☒ Delete
NAME FRANK, JOSEPH V
STREET ADDRESS 741 FLAMINGO DRIVE
CITY-ST-ZIP APOLLO BEACH FL 33572

TITLE ST ☒ Change ☐ Addition
NAME Morris, Donna
STREET ADDRESS 11915 Cedarfield DR
CITY-ST-ZIP Riverview, FL 33569

TITLE V ☐ Delete
NAME BRATE, DAVID J
STREET ADDRESS 8605 STONER WOODS DRIVE
CITY-ST-ZIP RIVERVIEW FL 33569

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

TITLE D ☐ Delete
NAME CLARK, MICHAEL L
STREET ADDRESS 1408 BEACH CLUB LANE
CITY-ST-ZIP APOLLO BEACH FL 33572

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

TITLE T ☒ Delete
NAME WAY, GRACE
STREET ADDRESS 1007 RIVER DR.
CITY-ST-ZIP RUSKIN FL 33570

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

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:

William K Wallingford
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REGISTERED AGENT

3/15/2000 (813) 690-2037
Date Daytime Phone #