

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000001229

1. Entity Name

PLYMOUTH AVENUE CHRISTIAN CHURCH, INC.

**FILED**  
**Feb 21, 2002 8:00 am**  
**Secretary of State**

02-21-2002 90034 007 \*\*\*\*61.25

Principal Place of Business

Mailing Address

1101 E PLYMOUTH AVENUE  
DELAND FL 32724

1101 E PLYMOUTH AVENUE  
DELAND FL 32724

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

59-2345719

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

SMITH, PHILIP T  
1101 E PLYMOUTH AVENUE  
DELAND FL 32724

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 MT  
NAME ADKINS, JACK ☐ Delete  
STREET ADDRESS %1101 E PLYMOUTH AVENUE  
CITY-ST-ZIP DELAND FL 32724

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

TITLE C  
NAME SMITH, WALTER ☐ Delete  
STREET ADDRESS C/O 1101 E PLYMOUTH AVE  
CITY-ST-ZIP DELAND FL 32724

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

TITLE DT  
NAME SMITH, PHILIP T ☐ Delete  
STREET ADDRESS %1101 E PLYMOUTH AVE  
CITY-ST-ZIP DELAND FL 32724

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

TITLE DT  
NAME MURPHY, JAMES ☐ Delete  
STREET ADDRESS 1101 E. PLYMOUTH AVENUE  
CITY-ST-ZIP DELAND FL

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

TITLE D  
NAME GREEN, WILLIAM ☐ Delete  
STREET ADDRESS %1101 E PLYMOUTH AVENUE  
CITY-ST-ZIP DELAND FL

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

TITLE D  
NAME RODEFFER, JON ☐ Delete  
STREET ADDRESS 1101 E. PLYMOUTH AVENUE  
CITY-ST-ZIP DELAND FL

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: JACK ADKINS *Jack Adkins*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 27, 2002 386-734-9141

Date

Daytime Phone #

CR2E037 (9/01)