

2001 UNIFORM BUSINESS REPORT (UBR)

4/1.

FILED
May 18, 2001 8:00 am
Secretary of State

04-14-2001 90008 002 ****61.25

DOCUMENT # N94000001674

1. Entity Name

NEW LIFE FELLOWSHIP CHURCH OF THE NAZARENE, INC.

Principal Place of Business

Mailing Address

3013 DEL PRADO BLVD.
 UNIT 13
 CAPE CORAL FL 33904

3013 DEL PRADO BLVD.
 UNIT 13
 CAPE CORAL FL 33904

2. Principal Place of Business

3. Mailing Address

428 PINE ISLAND RD. SW Unit 3
 Suite, Apt. #, etc.
 CAPE CORAL, FL.
 City & State

Suite, Apt. #, etc.

City & State

Zip
 33991

Country
 LEE

Zip

Country

4. FEI Number

65-0484244

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

BISHOP, WILLIAM R
 3013 DEL PRADO BLVD.
 UNIT 13
 CAPE CORAL FL 33904

Name

William R. Bishop

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

428 PINE ISLAND RD. SW. UNIT 3

CAPE CORAL,
 City

FL

Zip Code

33991

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 William R. Bishop

Signature, typed or printed name of registered agent and title if applicable

William R. Bishop

(NOTE: Registered Agent signature required when reinstating)

4-9-01

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	VD	☐ Delete
NAME	CAUDLE, TINA	
STREET ADDRESS	3711 SW 14TH PLACE	
CITY-ST-ZIP	CAPE CORAL FL 33914	
TITLE	S	☒ Delete
NAME	ELIAS, TIM	
STREET ADDRESS	3416 S.W. 3RD AVE.	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE	VD	☐ Delete
NAME	ANGLES, RONALD -D	
STREET ADDRESS	5023 SW 26 AVE	
CITY-ST-ZIP	CAPE CORAL FL 33914	
TITLE	P	☐ Delete
NAME	BISHOP, WILLIAM R	
STREET ADDRESS	1728 SE 14TH STREET	
CITY-ST-ZIP	CAPE CORAL FL 33990	
TITLE	T	☒ Delete
NAME	NOLFF, DALE	
STREET ADDRESS	1502 N.E. 13TH TERR	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE	VD	☒ Delete
NAME	PERRY-LEHNERT, DAWN	
STREET ADDRESS	318 SE 14TH STREET	
CITY-ST-ZIP	CAPE CORAL FL 33990	

TITLE	S	☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	GARY ALLISON -D	☒ Change ☐ Addition
NAME	724 N.E. 11th TERR.	
STREET ADDRESS	CAPE CORAL, FL. 33909	
CITY-ST-ZIP		
TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	T	☒ Change ☐ Addition
NAME	ERIC URBAN -D	
STREET ADDRESS	235 S.W. 40th STREET	
CITY-ST-ZIP	CAPE CORAL, FL. 33904	
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 R. Bishop

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-9-2001 (941) 772-5678

Date

Daytime Phone #

CR2E037 (10/00)