

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****May 18, 2000 8:00 am**
Secretary of State

05-18-2000 90304 021 ****61.25

A0061708

DO NOT WRITE IN THIS SPACE

DOCUMENT # N98000003734

1. Entity Name

WAUSAU ASSEMBLY OF GOD CHURCH, INC.

Principal Place of Business

Mailing Address

**CORNER OF 77 & PIONEER RD.
WAUSAU FL 32463****P.O. BOX 294
WAUSAU FL 32463-0294**

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

59-3034035

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

**HADDOCK, DONALD
2905 PIONEER RD.
VERNON FL 32462**

Name

A.D. Pettis

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

4219 Hwy 77**Chipley, FL 32428**

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

A.D. Pettis**5/1/00**

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
**TD
HADDOCK, DONALD
2905 PIONEER RD.
VERNON FL 32462** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
Bill Worley
3982 Creeks Rd
VERNON, FL 32462** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
PETTIS, A.D.
4219 HWY 77
CHIPLEY FL 32428** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
Ross Pettis
1912 Fire Tower Rd.
Chipley, FL 32428** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
SAPP, JERRY
3350 BONNETT POND RD.
WAUSAU FL 32463** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
Brock, Travis
3214 Amanda Way
Vernon FL 32462** ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
BROCK, TRAVIS
3214 AMANDA WAY
VERNON FL 32462** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
Brock, Travis
3214 Amanda Way
Vernon FL 32462** ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
Brock, Travis
3214 AMANDA WAY
VERNON FL 32462** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
Brock, Travis
3214 Amanda Way
Vernon FL 32462** ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
Brock, Travis
3214 AMANDA WAY
VERNON FL 32462** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
Brock, Travis
3214 Amanda Way
Vernon FL 32462** ☐ 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 A.D. Pettis**5/1/00 (850) 773-3545**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 9/99