

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 12, 2003 8:00 am
Secretary of State

02-12-2003 90082 034 ****61.25



DOCUMENT # 700304

1. Entity Name
EAST ORLANDO BAPTIST CHURCH HOLDING COMPANY, INC

Principal Place of Business

**8287 CURRYFORD ROAD
ORLANDO FL 32822**

Mailing Address

**8287 CURRYFORD ROAD
ORLANDO FL 32822**

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 **70-0304581**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**SAULSBURY, GERALDINE C
1634 STEVENS AVE
ORLANDO FL 32806**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	EVANS, JERRY	
STREET ADDRESS	4627 CANARY ST	
CITY-ST-ZIP	ORLANDO FL 82806	
TITLE	T	<input type="checkbox"/> Delete
NAME	THOMAS, GENE	
STREET ADDRESS	355 PINE BLVD	
CITY-ST-ZIP	MERRITT ISLAND FL 32952	
TITLE	DT	<input checked="" type="checkbox"/> Delete
NAME	MOSHER, DEWAIN	
STREET ADDRESS	3209 SOCORRO DR	
CITY-ST-ZIP	ORLANDO FL 32829	
TITLE	DT	<input checked="" type="checkbox"/> Delete
NAME	YATES, TOMMY	
STREET ADDRESS	5218 FORMBY DR	
CITY-ST-ZIP	ORLANDO FL 32817	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BROWN, CHRIS	
STREET ADDRESS	3106 S CHICKASAW TRAIL	
CITY-ST-ZIP	ORLANDO FL 32829	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Charlie Boesch	
STREET ADDRESS	12040 Gray Birch Circle	
CITY-ST-ZIP	Orlando, FL 32822	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jeffrey Mason	
STREET ADDRESS	1634 Stevens Ave.	
CITY-ST-ZIP	Orlando, FL 32806	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Buck Gary	
STREET ADDRESS	9906 Surrey Ridge Rd.	
CITY-ST-ZIP	Orlando, FL 32825	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Geraldine Saulsbury*

2/10/03 (407) 275-7225

CR2E037 (10/02)