2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 12, 2001 8:00 am
Secretary of State
04-12-2001 90173 045 ****61.25

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DOCUMENT # 700679

1. Entity Name

NEW SMYRNA BEACHSIDE BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
BEACH FLORIDA INC 629 S PINE ST NEW SMYRNA BEACH FL 32170	BEACH FLORIDA INC 629 S PINE ST NEW SMYRNA BEACH FL 32170

D0034856

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
	629 S. Pine St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: New Smyrna Beach, FL.
Zip / Country	Zip: 32169 / Country

4. FEI Number: 59-1024470 ☐ 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
WALTER, ALLEN 3 LYNN COURT NEW SMYRNA BEACH FL 32168-636	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MITCHELL SHEETS 2220 JUANITA DR. NEW SMYRNA BCH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Elizabeth Thompson 823 Hope Street New Smyrna Beach, FL. 32169	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SIMPSON, RAY 601 N ATLANTIC AVE 505 NEW SMYRNA BCH FL 32169	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Bruce E. Smith, Sr. 231 Meadow Lake Dr Edgewater, FL. 32141	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ALLEN, WALTER 3 LYNN CT NEW SMYRNA BCH FL 32168	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP IVES, FRED PO BOX 2604 NEW SMYRNA BCH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Jack Deeds 836 25TH Ave. New Smyrna Beach, FL. 32169	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: Allen Walter SIGNATURE Allen Walter 4/5/2001 (386) 428-4452
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #