

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 13, 2002 8:00 am**  
**Secretary of State**

02-13-2002 90287 017 \*\*\*\*61.25

**DOCUMENT # 701354**

1. Entity Name

**FIRST BAPTIST CHURCH OF PINELLAS PARK.**

Principal Place of Business

Mailing Address

**5495 PARK BOULEVARD  
 PINELLAS PARK FL 34665**

**5495 PARK BOULEVARD  
 PINELLAS PARK FL 34665**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-6033537**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~ROBINSON, GARY D JR  
 11007 RUMFORD CT  
 PINELLAS PARK FL 33782~~

~~COPENHAVER, DENNIS  
 10030 61st WAY N  
 PINELLAS PARK FL 33782~~

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

*Dennis R. Copenhaver*  
 Dennis R. Copenhaver

1-23-02

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  Delete  
 NAME **D ROBINSON, LEROY D JR**  
 STREET ADDRESS **11007 RUMFORD CT**  
 CITY-ST-ZIP **PINELLAS PARK FL 33782**

TITLE  Change  Addition  
 NAME **T RANDY RAYBURN**  
 STREET ADDRESS **8280 56th ST N**  
 CITY-ST-ZIP **PINELLAS PARK FL 33781**

TITLE  Delete  
 NAME **T STROUSE, JAY**  
 STREET ADDRESS **8798 56TH WAY N**  
 CITY-ST-ZIP **PINELLAS PARK FL 33782**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **COPENHAVER, DENNIS**  
 STREET ADDRESS **10030 61ST WAY N**  
 CITY-ST-ZIP **PINELLAS PARK FL 33782**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **T MYERS, JOHN**  
 STREET ADDRESS **5830 86TH AVE N**  
 CITY-ST-ZIP **PINELLAS PARK FL 33782**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **T BRYANT, RICK**  
 STREET ADDRESS **5824 64TH TERR NO**  
 CITY-ST-ZIP **PINELLAS PARK FL 33781**

TITLE  Change  Addition  
 NAME **T DON CUNNINGHAM**  
 STREET ADDRESS **8848 56th WAY N**  
 CITY-ST-ZIP **PINELLAS PARK FL 33782**

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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 an other like empowered.

SIGNATURE:

*Dennis R. Copenhaver*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)