

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 704679

1. Entity Name

FLORIDA BAPTIST CHILDREN'S HOMES, INC.

Principal Place of Business

1015 SIKES BLVD
LAKELAND FL 33801-1499

Mailing Address

PO BOX 8190
LAKELAND FL 33813
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

33815

Country

Zip

33802

Country

4. FEI Number

59-0657326

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HODGES, CHARLES
3803 OLD HIGHWAY 37
#127
LAKELAND FL 33813

7. Name and Address of New Registered Agent

Name

Charles Hodges

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

1015 Sikes Blvd.

City

Lakeland,

FL

Zip Code

33815

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

Charles P. Hodges

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

(NOTE: Registered Agent signature required when reinstating)

02/05/01

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

TITLE CD
NAME HAHN, JAMES P
STREET ADDRESS PO BOX 38
CITY-ST-ZIP LAKELAND FL 33802 ☐ Delete

TITLE VCD
NAME GRIGSBY, NANCY
STREET ADDRESS 1740 BOLTON VILLAGE LN
CITY-ST-ZIP NICEVILLE FL 32578 ☒ Delete

TITLE VCD
NAME SALTSMAN, DAN
STREET ADDRESS 7459 HAZELNUT DRIVE
CITY-ST-ZIP WEBSTER FL 33567 ☒ Delete

TITLE P
NAME HODGES, CHARLES
STREET ADDRESS 3803 OLD HIGHWAY 37, # 127
CITY-ST-ZIP LAKELAND FL ☐ Delete

TITLE VP/T
NAME JOHNSTON, STEVEN P
STREET ADDRESS 2025 SYLVESTER
CITY-ST-ZIP LAKELAND FL 33802 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE CD
NAME Hahn, James P.
STREET ADDRESS 1015 Sikes Blvd.
CITY-ST-ZIP Lakeland, FL. 33815 ☒ Change ☐ Addition

TITLE VCD
NAME Perrin, Jackie
STREET ADDRESS 1015 Sikes Blvd.
CITY-ST-ZIP Lakeland, FL 33815 ☐ Change ☒ Addition

TITLE VCD
NAME Melton, Ray
STREET ADDRESS 1015 Sikes Blvd.
CITY-ST-ZIP Lakeland, FL 33815 ☐ Change ☒ Addition

TITLE P
NAME Hodges, Charles
STREET ADDRESS 1015 Sikes Blvd.
CITY-ST-ZIP Lakeland, FL 33815 ☒ Change ☐ Addition

TITLE VP/T
NAME Johnston, Steven P.
STREET ADDRESS 1015 Sikes Blvd.
CITY-ST-ZIP Lakeland, FL 33815 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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:

Steven P. Johnston

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REQUIRED Steven P. Johnston

2/2/01

863-687-8811

Date

Daytime Phone #

CR2E037 (10/00)

0063359



DO NOT WRITE IN THIS SPACE