

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

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90314 007 ****61.25

DOCUMENT # 710641

1. Entity Name

FIRST BAPTIST CHURCH OF ROCKLEDGE, FLORIDA, INC.



Principal Place of Business

**1810 CEDAR STREET
ROCKLEDGE FL 32955**

Mailing Address

**1810 CEDAR STREET
ROCKLEDGE FL 32955**

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 **59-1150446**

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

**POOR, J.WALLACE
958 BAYWARD PLACE
ROCKLEDGE FL 32955**

Name

Richard L. Piper

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

1409 College Ave.

City

Cocoa

FL

Zip Code
32922

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 *Richard L. Piper*
Signature, typed or printed name of registered agent and title if applicable.

Richard L. Piper PD

3-27-03

(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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **STD** ☐ Delete
NAME **FRYMAN, ROBERT**
STREET ADDRESS **117 N. INDIAN CIRCLE**
CITY-ST-ZIP **COCOA FL**

TITLE **PD** ☒ Change ☐ Addition
NAME **Richard L. Piper**
STREET ADDRESS **1409 College Ave.**
CITY-ST-ZIP **Cocoa, FL 32922**

TITLE **PD** ☐ Delete
NAME **POOR, WALLACE JR**
STREET ADDRESS **958 BAYWARD PLACE**
CITY-ST-ZIP **ROCKLEDGE FL 32955**

TITLE **VD** ☒ Change ☐ Addition
NAME **Jesse Howard James**
STREET ADDRESS **1000 Woodsmere Circle**
CITY-ST-ZIP **Rockledge, FL 32955**

TITLE **TD** ☐ Delete
NAME **HARTMAN, DANIEL**
STREET ADDRESS **1290 ROBBINSWOOD DR**
CITY-ST-ZIP **ROCKLEDGE FL 32955**

TITLE **SD** ☒ Change ☐ Addition
NAME **Steven J. Harris**
STREET ADDRESS **34 Magruder Terr.**
CITY-ST-ZIP **Rockledge, FL 32955**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 all other like empowered.

SIGNATURE: *Richard L. Piper* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-27-03

321 633-7032

Date

Daytime Phone #

CR2E037 (10/02)