

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 717510

1. Entity Name

HEAVENLY HEIGHTS BAPTIST CHURCH, INC.

Principal Place of Business

Mailing Address

6680 DUNN AVENUE
JACKSONVILLE FL 32218

6680 DUNN AVENUE
JACKSONVILLE FL 32218-4354

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

59-1378573

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

Name

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

City

FL

Zip Code

BECK, SIDNEY
5272 RATLIFF RD
CALLAHAN FL 32011

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 SD ☐ Delete
NAME MARK L. CHESSER
STREET ADDRESS 7709 SYCAMORE ST
CITY-ST-ZIP JACKSONVILLE FL

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

TITLE VD ☐ Delete
NAME MURPHY, WILLIAM, H
STREET ADDRESS RT. 3, BOX 1474
CITY-ST-ZIP CALLAHAN FL

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

TITLE VD ☐ Delete
NAME BENNETT, G.
STREET ADDRESS RT 2 BOX 1139
CITY-ST-ZIP BRYCEVILLE FL 32009

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

TITLE PD ☐ Delete
NAME BECK, S.E.
STREET ADDRESS 5272 RATLIFF RD
CITY-ST-ZIP CALLAHAN FL

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

TITLE TD ☐ Delete
NAME BENNETT, ROBERT
STREET ADDRESS HC 2 BOX 2035
CITY-ST-ZIP BRUCEVILLE FL 32009

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

TITLE VD ☐ Delete
NAME PATTERSON, JAMES D
STREET ADDRESS 3381 SUNNYBROOK AVE. S.
CITY-ST-ZIP JACKSONVILLE FL 32254

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: *Sidney Beck* RESIDING E. Beck

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-17-2000 (904) 7645667

Date

Daytime Phone #

CR2E037 (9/99)