2003 NOT-FOR-PROFIT CORPORATION

Feb 13, 2003 8:00 am UNIFORM BUSINESS REPORT (UBR) Secretary of State **DOCUMENT # 717510** 02-13-2003 90250 042 ****70.00 1. Entity Name HEAVENLY HEIGHTS BAPTIST CHURCH, INC. Mailing Address Principal Place of Business 6680 DUNN AVENUE 6680 DUNN AVENUE JACKSONVILLE FL 32218 JACKSONVILLE FL 32218 3. Mailing Address 2. Principal Place of Business ☐ CHECK HERE IF MAKING CHANGES Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number 59-1378573 City & State City & State Not Applicable \$8.75 Additional Country Country Zip 5. Certificate of Status Desired Zip Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **BECK, SIDNEY** 5272 RATLIFF RD CALLAHAN FL 32011 Zip Code City FI 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 th∈ ⇒bligations of registered agent. 2-5-03 SIGN (NOTE: Registered Agent signature required when reinstating) printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Florida Department of State FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. OFFICERS AND DIRECTORS 10. ☐ Addition TITLE SD ☐ Delete TITLE NAME MARK L. CHESSER NAME STREET ADDRESS STREET ADDRESS 7709 SYCAMORE ST CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL ■ Addition ☐ Change ☐ Delete TITLE TITLE NAME MURPHY, WILLIAM, H NAME STREET ADDRESS RT. 3. BOX 1474 STREET ADDRESS CITY-ST. ZIP. CALLAHAN FL --CITY-ST-ZIP **Addition** Change Delete TITLE TITLE NORMAN MANCIL NAME 5540 ADA JOHNSON RD. BENNETT, G. NAME STREET ADDRESS JACKSONVILLE, FL STREET ADDRESS RT 2 BOX 1139 CITY-ST-ZIP 32218 CITY-ST-ZIP BRYCEVILLE FL 32009 ☐ Addition Change TITLE ☐ Delete PD TITLE NAME BECK, S.E. NAME STREET ADDRESS STREET ADDRESS 5272 RATLIFF RD CITY-ST-ZIP CITY-ST-ZIP CALLAHAN FL Change Addition Delete TITLE TED CONRAD TITLE 1161 SAWYERWOOD DR. NAME BENNETT, ROBERT NAME STREET ADDRESS JACKSONVILLE, FL HC 2 BOX 2035 STREET ADDRESS 32221 CITY-ST-ZIP CITY-ST-ZIP **BRUCEVILE FL 32009** ☐ Addition ☐ Change TITLE Delete VD TITLE

12. I hereby certify that the information supplied with this filling 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

PATTERSON, JAMES D

3381 SUNNYBROOK AVE. S.

JACKSONVILLE FL 32254

2/5/03

904)

FILED