2002 UNIFORM BUSINESS REPORT (UBR) **FILED** May 10, 2002 8:00 am Secretary of State **DOCUMENT # 720146** 1. Entity Name CHURCH IN THE WILDWOOD (CHRISTIAN), INC. 05-10-2002 90005 017 ****61.25 Principal Place of Business Mailing Address 10051 COUNTRY ROAD 10051 COUNTRY ROAD **BROOKSVILLE FL 34613 BROOKSVILLE FL 34613** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2355849 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required — 6. Name and Address of Current Registered Agent -7. Name and Address of New Registered Agent ampbel MCGREW, DAVID **4644 KEYSVILLE AVE** SPRING HILL FL 34608 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 ed agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to وي التخت FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PDCT TITLE Delete TITLE ☐ Change Addition Robert Beason MCGREW, DAVID M NAME NAME STREET ADDRESS 4644 KEYSVILLE AVE STREET ADDRESS 11118 Tilburg St CITY-ST-ZIP SPRING HILL FL 34608 CITY-ST-ZIP Spring Hill, FL 34608 TITLE TITLE ☐ Defete Change Addition ECHOLS, MICHAEL NAME NAME James Jackson 13046 FELLOWSHIP LANE 8211 Floral DINE STREET ADDRESS STREET ADDRESS CITY-ST-7IP **BROOKSVILLE FL 34614** 34607 CITY-ST-ZIP Spring Hill, F.L TITLE Delete TITLE Change Addition MILLER, JOE NAME NAME 6104 FREEPORT DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIE SPRING HILL FL 34606 Spring Hill, FL 34609 CITY-ST-ZIP DTR TITLE ☐ Delete TITLE Change ☐ Addition PARDUE, DAVID NAME David Pardue NAME 14395 CENTRALIA RD STREET ADDRESS STREET ADDRESS BROOKSVILLE FL 34614 CITY-ST-7IP CiTY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition PHELPS, HANK NAME Hank Phelps NAME STREET ADDRESS 13024 FELLOWSHIP LANE STREET ADDRESS CITY-ST-ZIP **BROOKSVILLE FL 34614** CITY-ST-ZIP VD ☐ Delete TITLE ☐ Addition CAMPBELL, JOHN NAME John Campbell NAME 11533 SHEFFIELD RD STREET ADDRESS STREET ADDRESS SPRING HILL FL 34608 CITY-ST-ZIP 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.

HAMMENT #720146 784720

