

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 02, 2000 8:00 am**  
**Secretary of State**

05-02-2000 90154 024 \*\*\*\*61.25

**DOCUMENT # 732645**

1. Entity Name

**EAST BAY BAPTIST CHURCH, INC.**

Principal Place of Business

Mailing Address

**508 HIGHWAY 2297  
 PANAMA CITY FL 32404**

**508 HIGHWAY 2297  
 PANAMA CITY FL 32404-2918**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-6596559**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**JOHNSON, EDWARD  
 11327 POSTON ROAD  
 PANAMA CITY FL 32404**

Name

**Dauphin, Mildon**

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

**1538 Primrose Lane**

City

**Panama City, Fl.**

**FL**

Zip Code

**32404**

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

*Mildon Dauphin*

**Mildon Dauphin, President**

**4-23-00**

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 **PD**  Delete  
 NAME **JOHNSON, EDWARD**  
 STREET ADDRESS **11327 POSTON ROAD**  
 CITY-ST-ZIP **PANAMA CITY, FL 00000 32404**

TITLE **President**  Change  Addition  
 NAME **Dauphin, Mildon**  
 STREET ADDRESS **1538 Primrose Lane, Panama City, Fl.**  
 CITY-ST-ZIP **1538 Primrose Lane, Panama City, Fl.**

TITLE **VD**  Delete  
 NAME **DAUPHIN, MILDON**  
 STREET ADDRESS **1538 PRIMROSE LANE**  
 CITY-ST-ZIP **PANAMA CITY FL 32404**

TITLE **VD**  Change  Addition  
 NAME **Harrell, John**  
 STREET ADDRESS **1717 Poston Drive**  
 CITY-ST-ZIP **Panama City, Fl. 32404**

TITLE **TD**  Delete  
 NAME **STUBBS, HARRY**  
 STREET ADDRESS **1502 PRIMROSE LANE**  
 CITY-ST-ZIP **PANAMA CITY FL 32404**

TITLE **TD**  Change  Addition  
 NAME **Hodges, Robert**  
 STREET ADDRESS **1916 Poston Drive**  
 CITY-ST-ZIP **Panama City, FL. 32404**

TITLE **SD**  Delete  
 NAME **DAUPHIN, SUE C.**  
 STREET ADDRESS **1538 PRIMROSE LANE**  
 CITY-ST-ZIP **PANAMA CITY FL 32404**

TITLE **SD**  Change  Addition  
 NAME **Pilcher, Michael**  
 STREET ADDRESS **6027 Hwy. 2297**  
 CITY-ST-ZIP **Panama City, Fl. 32404**

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:

*Mildon Dauphin* **Mildon DAUPHIN** **4-23-00** **8507635361**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)