

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2000 8:00 am
Secretary of State

02-03-2000 90001 049 ****61.25

DOCUMENT # 744875

1. Entity Name

THE BIBLE BAPTIST CHURCH OF BRADENTON, FLORIDA,

Principal Place of Business

Mailing Address

2113 MORGAN JOHNSON RD
 BRADENTON FL 34208

2113 MORGAN JOHNSON RD
 BRADENTON FL 34208-6513



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2119467

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

BYRAM, GARY
1111 134 ST E.
BRADENTON, FL. FL 34202

Name

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

City

FL

Zip Code

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

Gary Byram
 Signature, typed or printed name of registered agent and title if applicable.

GARY BYRAM

1-11-00

(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	D	<input type="checkbox"/> Delete
NAME	MARLOW, A.D.	
STREET ADDRESS	3607-38TH AVENUE, E.	
CITY-ST-ZIP	BRADENTON FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	MASTERTSON, TODD	
STREET ADDRESS	12306 SR 62	
CITY-ST-ZIP	PARRISH FL 34219	
TITLE	VD	<input type="checkbox"/> Delete
NAME	STRONG, CLIFF	
STREET ADDRESS	4512-3 AVE. E.	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:

SAAD MARLOW
SAAD MARLOW, EQUA D M MARLOW

1-11-00

Date

Daytime Phone #

941
746-6221

CR2E037 (9/99)