FILED

2001 UNIFORM BUSINESS REPORT (UBR)

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

Mar 20, 2001 8:00 am-Secretary of State DOCUMENT # 762582 1. Entity Name FIRST BAPTIST CHURCH OF WELLINGTON, INC. 03-20-2001 90066 005 ****61.25 Mailing Address Principal Place of Business 12700 FOREST HILL BLVD. W 12700 FOREST HILL BLVD. W. WELLINGTON FL 33414-4765 WELLINGTON FL 33414-4765 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2025397 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) TOWNSEND, TERRY G. 12700 FOREST HILL BLVD. WEST WELLINGTON FL 33414 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 (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. **Department of State FEE IS \$61.25** Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. X Addition ☐ Delete TITLE TITLE NAME TOWNSEND, TERRY G. NAME STREET ADDRESS STREET ADDRESS 12700 FOREST HILL BLVD W CITY-ST-ZIP 33414 CITY-ST-ZIP WELLINGTON FL 33414 ☐ Change Addition TITLE TR ☐ Delete TITLE NAME RAY, TERRILL NAME STREET ADDRESS STREET ADDRESS 14829 HORSESHOE TRACE CITY-ST-ZIP CITY-ST-ZIP **WELLINGTON FL 33414** ☐ Addition ☐ Change TITLE TR ☐ Delete TITLE DODSON, BILL NAME NAME STREET ADDRESS STREET ADDRESS 15818 KEY LIME BLVD CITY-ST-ZIP CITY-ST-ZIP LOXAHATCHEE FL 33470 Change Addition Delete TITLE TITLE FRECHETTE, Donna 3422 161st Terrace NAME **AUTWELL, ELISE** NAME STREET ADDRESS STREET ADDRESS 16121 73 CT NO. Loxahatchec, FL 33470 CITY-ST-ZIP CITY-ST-ZIP LOXAHATCHEE FL 33470 ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME NAME CAUSEY, WILLIAM STREET ADDRESS STREET ADDRESS 16280 EPSON DRIVE EAST CITY-ST-ZIP CITY-ST-7IP LOXAHATCHEE FL 33470 Change Addition TITLE ☐ Delete TITLE NAME CIOFFI, SHANE NAME STREET ADDRESS STREET ADDRESS 13015 BLUE LAKE DRIVE CITY-ST-ZIP CITY-ST-ZIP WELLINGTON FL 33414 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 of the property of the corporation of the receiver or trustee empowered to execute this report of the property of the corporation of the receiver or trustee empowered to execute this report of the corporation of the receiver or trustee empowered to execute this report of the corporation of the receiver or trustee empowered to execute this report of the corporation of the receiver or trustee empowered to execute this report of the corporation of the receiver or trustee empowered to execute this report of the corporation of the receiver or trustee empowered to execute this report of the corporation of the receiver or trustee empowered to execute this report of the corporation of the receiver or trustee empowered to execute this report of the corporation of the receiver or trustee empowered to execute this report of the corporation of the receiver or trustee empowered to execute this report of the corporation of the receiver or trustee empowered to execute this report of the corporation of the receiver or trustee empowered to execute this report of the receiver of the r

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Terry G. Townsend 03/14/01