

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 767247

FILED
Jan 09, 2003
Secretary of State

Entity Name: FIRST BAPTIST CHURCH CITRUS PARK, INC.

Current Principal Place of Business:

7705 GUNN HWY
TAMPA, FL 33625

New Principal Place of Business:

Current Mailing Address:

7705 GUNN HWY
TAMPA, FL 33625

New Mailing Address:

FEI Number: 59-1268217

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRANT, JOHN A., JR., ESQ.
1411 N. WESTSHORE BLVD., #100
TAMPA, FL 33607

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: LEATHERMAN, GARY
Address: 16201 ARMISTEAD LANE
City-St-Zip: ODESSA, FL

Title: VD () Delete
Name: HOWLETT, JOE
Address: 12708 CHE CHE PLACE
City-St-Zip: TAMPA, FL

Title: PD () Delete
Name: SMITH, GEOFFREY
Address: 9512 EDDINGS ROAD
City-St-Zip: ODESSA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEOFFREY SMITH

PD

01/09/2003

Electronic Signature of Signing Officer or Director

_____ Date