

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2000 8:00 am
Secretary of State

02-04-2000 90045 003 ****61.25

DOCUMENT # N00288

1. Entity Name

THE SOUTH BABCOCK STREET BAPTIST CHURCH, INC.

Principal Place of Business

Mailing Address

7415 BABCOCK STREET S.E.
 PALM BAY FL 32909

7415 BABCOCK STREET S.E.
 PALM BAY FL 32909-5650

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2355906

Applied For

Not Applicable

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

LOURY, DENNIS
1364 HAZEL ST. NW
PALM BAY FL 32907

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

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 Delete
 NAME **DP LOURY, DENNIS**
 STREET ADDRESS **1364 HAZEL ST NW**
 CITY-ST-ZIP **PALM BAY FL 34022**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **DV FRAZIER, ROBERT R**
 STREET ADDRESS **7425 BABCOCK ST.,S.E.**
 CITY-ST-ZIP **PALM BAY FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **DS LOURY, GENE**
 STREET ADDRESS **573 PARKER RD.**
 CITY-ST-ZIP **MELBOURNE FL 34056**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **DT RAYMOND, BYER**
 STREET ADDRESS **1053 CELLE AVE. N.W.**
 CITY-ST-ZIP **PALM BAY FL 34022**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D SIMON, RICHARD**
 STREET ADDRESS **663 CROTON RD**
 CITY-ST-ZIP **MELBOURNE FL 34056**

TITLE Change Addition
 NAME **D Sullivan Harold**
 STREET ADDRESS **1347 Union ST SE**
 CITY-ST-ZIP **Palm Bay FL 32909**

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: *Dennis Loury*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8-99
 Date

321-727-0197
 Daytime Phone #



DO NOT WRITE IN THIS SPACE