

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N03654

FILED
Apr 29, 2003
Secretary of State

Entity Name: CENTRAL BAPTIST CHURCH OF THE HALIFAX AREA

Current Principal Place of Business:

142 FAIRVIEW AVE
DAYTONA BEACH, FL 321142199 US

New Principal Place of Business:

Current Mailing Address:

142 FAIRVIEW AVE
DAYTONA BEACH, FL 321142199 US

New Mailing Address:

FEI Number: 59-0806964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TOZER, AIDEN
142 FAIRVIEW AVE
DAYTONA BEACH, FL 321142199 US

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: D () Delete
Name: MCDANIEL, ROBERT
Address: 142 FAIRVIEW AVENUE
City-St-Zip: DAYTONA BEACH, FL

Title: VC () Delete
Name: PEEBLES, WILLIAM
Address: 142 FAIRVIEW AVENUE
City-St-Zip: DAYTONA BEACH, FL

Title: SD () Delete
Name: RIPPEY, BILL S
Address: 142 FAIRVIEW AVENUE
City-St-Zip: DAYTONA BEACH, FL

Title: AT () Delete
Name: SANDERS, EDWARD
Address: 142 FAIRVIEW AVENUE
City-St-Zip: DAYTONA BEACH, FL

Title: CD () Delete
Name: TOZER, AIDEN
Address: 142 FAIRVIEW AVENUE
City-St-Zip: DAYTONA BEACH, FL

Title: TD () Delete
Name: SMITH, ALVIN
Address: 142 FAIRVIEW AVENUE
City-St-Zip: DAYTONA BEACH, 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:

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: WILLIAM PEEBLES

VC

04/29/2003

Electronic Signature of Signing Officer or Director

_____ Date