

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2002 8:00 am
Secretary of State

07-10-2002 90193 013 ****61.25

DOCUMENT # N15422

1. Entity Name

FIRST BAPTIST CHURCH OF NAVARRE, INC.

Principal Place of Business

Mailing Address

**9302 NAVARRE PKWY
 NAVARRE FL 32566-2910
 US**

**9302 NAVARRE PKWY
 NAVARRE FL 32566-2910
 US**

B0128288



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 **59-2478231**

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

**BROOKS, LESLIE
 10088 CALLE DE PALENCIA
 NAVARRE FL 32566**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**After September 13, 2002,
 min. will be \$236.25.**

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 NAME STREET ADDRESS CITY-ST-ZIP	PD PLANK, DON 7234 SHEARWATER DR. NAVARRE FL 32566	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LAMBETH, JAMES 1710 SUNNY OAK ST. NAVARRE FL 32566	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HOLTZ, CAROL 2737 DOVE HAVEN LANE NAVARRE FL 32566	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BROOKS, LESLIE 10088 CALLE DE PALENCIA NAVARRE FL 32566	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 1780 Villa Vizcaya Dr.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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: **Donald H. Plank** **Donald (Don) H. Plank** 7/7/2002 850-939-2879

CR2E037 (4/02)