2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State
05-28-2002 91733 003 ****61.25

DOCUMENT # N16362

1. Entity Name

ELIM BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
RT. 2 BOX 560 FT. WHITE FL 32038	P O BOX 448 FT. WHITE FL 32038 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MARTIN, J. WILLIE
ROUTE 3, BOX 3701
FT WHITE FL 32038

7. Name and Address of New Registered Agent

Name: Norman Porter
Street Address (P.O. Box Number is Not Acceptable): Rt 2 Box 4960
City: Fort White **FL** Zip Code: 32038

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 ✓ Norman Porter Norman Porter 4-15-02
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARTIN, J. WILLIE ROUTE 3, BOX 5707 FORT WHITE FL 32038	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CROFT, R.C. ROUTE 2, BOX 835 HIGH SPRINGS FL 32643	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Gary MacManus 3990 SW Elim Church Rd. Fort White, FL 32038 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HAWKINS, GWENDOLYN RT. 2 BOX 5225 FT. WHITE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Gwendolyn Hawkins 6855 SW Elim Church Rd. Fort White, FL 32038 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S PORTER, ANNIE L. RT. 2 BOX 4960 FT. WHITE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILSON, ROY ROUTE 4 BOX 5195 FORT WHITE FL 32038	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Norman Porter Rt 2 Box 4960 Fort White, FL 32038 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

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: ✓ Norman Porter REQUIRED 4-15-02 386-497-2044
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #