

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2003 8:00 am
Secretary of State

01-15-2003 90203 008 ****70.00

DOCUMENT # N20002

1. Entity Name

COVENANT BAPTIST CHURCH OF GAINESVILLE, INC.



Principal Place of Business

**3115 NW 16TH AVE.
GAINESVILLE FL 32605**

Mailing Address

**3115 NW 16TH AVE.
GAINESVILLE FL 32605**

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 **59-2809386**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**MORGAN, JOE
5401 NW 14TH AVENUE
GAINESVILLE FL 32605**

7. Name and Address of New Registered Agent

Name

RON MARKS

Street Address (P.O. Box Number is Not Acceptable)

2736 N.W. 22nd TERRACE

City

GAINESVILLE

FL

Zip Code

32605

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

Ronald Marks

1-6-03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MORGAN, JOE 5401 NW 14TH AVENUE GAINESVILLE FL 32605	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SMITTLE, STEVEN 3115 NW 16 AVE GAINESVILLE FL 32605	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DOSE, DAVID 1224 NW 36 ST. GAINESVILLE FL 32605	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HOPE, EDWINA 1919 NW 4TH AVENUE GAINESVILLE FL 32603	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Ronald Marks 2736 NW 22nd Terrace Gainesville FL 32605	☐ 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
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:

Ronald Marks

1-6-03

352-378-9843

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)