## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N42829

FILED Mar 19, 2003 Secretary of State

Entity Name: FLORIDA BAPTIST FINANCIAL SERVICES, INC.

Current Principal Place of Business:			New Prin	New Principal Place of Business:			
	ORICKS AVE VILLE, FL 32207						
Current Mailing Address:			New Mail	New Mailing Address:			
	ORICKS AVE VILLE, FL 32207						
FEI Number: 59-0696288 FEI Number Applied For() FEI			FEI Number Not App	Number Not Applicable ( ) Certificate of Status Desired (X)			
Name and	Address of Cur	rent Registered Agent:	Name and	d Address of	New Registered	Agent:	
1320 HENE JACKSON	AND, EDDIE L DRICKS AVE. VILLE, FL 32207 named entity sub	US omits this statement for the pu	urpose of changing	its registered	office or registere	d agent, or both,	
in the State	of Florida.						
SIGNATUR		Oinnatura af Daniatanad Anna			Data		
Electronic Signature of Registered Agent				Date			
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () De ANDERSON, LIND. 9526 WATERFOR JACKSONVILLE, F	A H D RD	Title: Name: Address: City-St-Zip:	COOLEY, DO 6735 CALVAD		n	
Title: Name: Address: City-St-Zip:	D () De COUEY, NED 112 OVERVIEW D CRESTVIEW, FL	RIVE	Title: Name: Address: City-St-Zip:	D ( HEADLEY, JR 1128 WOODL ORLANDO, FI	AND STREET	n	
Title: Name: Address: City-St-Zip:	D () De HILL, STAN W 8483 STABLES RO JACKSONVILLE, F	DAD	Title: Name: Address: City-St-Zip:	D (X SCOTT, T. AL 1043 PINEVIE LAKE CITY, F	EW CIRCLE	n	
Title: Name: Address: City-St-Zip:	P () De MCCLELLAND, ED 1320 HENDRICKS JACKSONVILLE, F	DDIE L AVENUE	Title: Name: Address: City-St-Zip:	(	) Change ( ) Additio	n	
Title: Name: Address: City-St-Zip:	D () De BALDWIN, VANITA 3258 HIDDEN LAK JACKSONVILLE, F	M E DRIVE WEST	Title: Name: Address: City-St-Zip:	(	) Change ()Additio	n	
Title: Name: Address: City-St-Zip:	D () De GUTA, RUDIE 10620 HUTCHINSO PANAMA CITY BE		Title: Name: Address: City-St-Zip:	BRAY, ROBEI 20175 KINDE	X) Change ()Additio RT V RKEMAC AVENUE .OTTE, FL 33952 US	n	

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: EDDIE L. MCCLELLAND P 03/19/2003