

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

FILED
Aug 06, 2003 8:00 am
Secretary of State

04-03-2003 90171 002 ****70.00

DOCUMENT # N47400

1. Entity Name
BEREAN BAPTIST CHURCH, INC.



Principal Place of Business
**740 LITHIA-PINECREST RD
BRANDON FL 33511
US**

Mailing Address
**740 LITHIA-PINECREST RD
BRANDON FL 33511
US**

55053462



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

4. FEI Number **59-3178230**
Applied For
Not Applicable

Zip Country

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

6. Name and Address of Current Registered Agent
**JEAN, MICHAEL A.
3003 STARMOUNT DR
VALRICO FL 33594**

7. Name and Address of New Registered Agent
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 _____
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
After September 10, 2003, min will be \$236.25

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	PD	☐ Delete
NAME	JEAN, MICHAEL A SR	
STREET ADDRESS	3003 STARMOUNT DR	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	D	☒ Delete
NAME	MCFADDEN, GREGEORY	
STREET ADDRESS	4308 ELLENVILLE PL	
CITY-ST-ZIP	VALRICO FL 33954	
TITLE	D	☒ Delete
NAME	HINTON, RUFUS	
STREET ADDRESS	914 WICKETRON DRIVE	
CITY-ST-ZIP	BRANDON FL 33510	
TITLE	D	☒ Delete
NAME	Joseph S. Robinson	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	☐ Change ☒ Addition
NAME	James Smith, III	
STREET ADDRESS	4900 Cypress Gardens Rd; Apt 115	
CITY-ST-ZIP	Winter Haven, FL 33884	
TITLE	D	☐ Change ☒ Addition
NAME	Joseph S. Robinson	
STREET ADDRESS	931 Sandywood Dr	
CITY-ST-ZIP	Brandon, FL 33510	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: _____
Signature of Registered Agent

CR2E037 (4/03)