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

FILED
May 16, 2003 8:00 am
Secretary of State
05-16-2003 90180 001 ****61.25

0065301

DOCUMENT # N94000004314

1. Entity Name
FIRST BAPTIST CHURCH OF SEVILLE, INC.

Principal Place of Business	Mailing Address
200 NORTH CHURCH ST. SEVILLE FL 32190-0127	P.O.BOX 127 SEVILLE FL 32190

CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
1875 N. Church St	Same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Seville, FL	City & State
Zip: 32190-0127 Country: USA	Zip Country

4. FEI Number 59-2119484 ☐ Applied For ☐ Not Applicable

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
PURVIS, JAMES E 600 PURVIS RD. SEVILLE FL 32190	Name: J T BOLI IV Street Address (P.O. Box Number is Not Acceptable): 2069 LAKE JUANITA RD City: SEVILLE FL Zip Code: 32190

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: J T Bolin 5-13-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE $ $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	TP BOYETTE, GASTON W 566 TURKEY SHOOT RD P O BOX 86 SEVILLE FL 32190	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TST MEW, CLAY 132 PARK DR P O BOX 358 SEVILLE FL 32190	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TV GAMBLE, GREG V 2400 CADE FERNERY RD SEVILLE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HAYNES, RUSSELL 570 RAULERSON RD SEVILLE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MEW, LANCE 235 LAKE GEORGE RD P O BOX 246 SEVILLE FL 32190	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

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 REQUIRED 5-13-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #