2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N9700005016 1. Entity Name

FILED Sep 17, 2001 8:00 am Secretary of State

EAGLE VIEW BAPTIST CHURCH, INC.					17-2001 90132 002		23
Principal Plac	ce of Business	Mailing Address	(
3348 MAHAN UNIT 3 TALLAHASSEI US		P O BOX 2156 Tallahassee FL 32316-		1 (00)((00) 010 (01)	1887 1871 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881	i i 1)(ii er ie) ii	F ana a ndi (an i
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Number 59-3471156			oplied For ot Applicable
Zip Country		Zip			5. Certificate of Status Desired \$8.75 Additional Fee Required		
	6. Name and Address of Current	Registered Agent	Name	7. Name and Addre	ss of New Registered A	gent	
			Name				
	L, DENNIS L		- Street Addre	ss (P:OBox-Number is No	t-Acceptable)		
	hview RD SSEE FL 32301						
IALLAHA	33EE FL 32301		City		FL	Zip Code	e _
8. The above	named entity submits this statement for	or the purpose of changing its	s registered office or regi	istered agent, or both, in the		<u> </u>	
\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.	That is a state of the state of	with purpose of changing its	s registered office of regi	Stored agent, or both, in the	c state of Florida.		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	FE: Registered Agent signature req	juired when reinstating)	DATE		
	FILE NOW: FEE IS \$61.25	9. Election Ca	9. Election Campaign Financing Trust Fund Contribution. \$5.00 Added to		May Be Make Check Payable to Pees Department of State		
Aitei Septi	ember 12, 2001, min. will be \$2	36.25 Trust Fund	Contribution.	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DI	.00.20	Contribution.	Added to Fees		t of State	
10.	OFFICERS AND DI	.00.20	11.	Added to Fees	Department TO OFFICERS AND DIRE	t of State	
10.	OFFICERS AND DIE	RECTORS	11. TITLE NAME	Added to Fees	Department TO OFFICERS AND DIRE	t of State	1 10
10. TITLE NAME	OFFICERS AND DI	RECTORS	11.	Added to Fees	Department TO OFFICERS AND DIRE	t of State	1 10
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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 attackment with an address with all other like expowered.