

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90120 028 ****70.00

DOCUMENT # N94000003755

1. Entity Name
MOUNT OLIVE MISSIONARY BAPTIST CHURCH OF CRYSTAL

Principal Place of Business Mailing Address
428 NE 3RD AVE **2931 S. CAUTHEN PT**
CRYSTAL RIVER FL 34428 **LECANTO FL 34461**

UUU1211Z

2. Principal Place of Business 3. Mailing Address
2105 N. Georgia Road **P.O. Box 327**
 Suite, Apt. #, etc. Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State City & State 4. FEI Number Applied For
Crystal River, FL **Crystal River, FL** **59-6568848** Not Applicable
 Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional
34429 **USA** **34423** **USA** Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
JOYNER, DOUGLAS J SR Name **Ocie Edwards, Jr.**
2931 S. CAUTHEN PT. Street Address (P.O. Box Number is Not Acceptable)
LECANTO FL 34461 **1400 N. DUNKENFIELD AVE**
 City **Crystal River** **FL** Zip Code **34429**

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.
 SIGNATURE *Ocie Edwards, Jr.* - **Ocie Edwards, Jr. - Deacon** DATE **01/19/01**
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 Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUSTEE SECRETARY BIDDLE, LILLIE M PO BOS 1261 CRYSTAL RIVER FL 34428 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Trustee Leroy J Hill 3 Carnation Ct E. Homasassa, FL 34446 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUSTEE BROOKS, KENNETH SR 5601 W ALAMEDA LN CRYSTAL RIVER FL 34429 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Trustee Willie Nelson 1154 NE 1st St. Crystal River, FL 34429 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Trustee Vice-Chairman COUNCIL, ALPHONSO 745 NE 5TH TERRACE CRYSTAL RIVER FL 34428 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUSTEE Whaley, Willard 2537-NORTH VIRGINIA Rd CRYSTAL RIVER FL 34428 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUSTEE WHALEY, WILLARD 822 NE FIRST ST CRYSTAL RIVER FL 34429 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUSTEE EDWARDS, OCIE, Jr. 1400 N DUNKENFIELD AVE CRYSTAL RIVER FL 34429 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUSTEE Chairmen EDWARDS, OCIE, Jr. 1400 N DUNKENFIELD AVE CRYSTAL RIVER FL 34429 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUSTEE Whaley, Willard 2537-NORTH VIRGINIA Rd CRYSTAL RIVER FL 34428 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUSTEE EDWARDS, OCIE, Jr. 1400 N DUNKENFIELD AVE CRYSTAL RIVER FL 34429 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUSTEE Whaley, Willard 2537-NORTH VIRGINIA Rd CRYSTAL RIVER FL 34428 <input type="checkbox"/> Change <input type="checkbox"/> 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: *Ocie Edwards, Jr.* - **Ocie Edwards, Jr. - Deacon** DATE **01/19/01** (352)795-0114
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE

02E037 (10/00)