

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 737882

1. Entity Name

FAITH BAPTIST CHURCH OF WINTER HAVEN, INC.

Principal Place of Business

2140 CRYSTAL BEACH RD
WINTER HAVEN FL 33880

Mailing Address

2140 CRYSTAL BEACH RD
WINTER HAVEN FL 33880

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2169854

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LONT, WALLACE
1104 STEVENSON RD
WINTER HAVEN FL 33880

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.

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

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 D
NAME WORTHINGTON, BYRON
STREET ADDRESS 521 SO 7TH ST
CITY-ST-ZIP EAGLE LAKE FL ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME VEGTER, BILL
STREET ADDRESS 100 OVERLOOK DRIVE
CITY-ST-ZIP WINTER HAVEN FL 33880 ☒ Delete

TITLE D
NAME RON FORSBERG
STREET ADDRESS 2007 BRENTWOOD DR;
CITY-ST-ZIP AUB. FL 33823 ☐ Change ☒ Addition

TITLE D
NAME CORBETT, JOHN
STREET ADDRESS 1 BRIDGEWATER DR
CITY-ST-ZIP WINTER HAVEN FL 33880 ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE T
NAME LONT, WALLACE
STREET ADDRESS 104 STEVENSON RD
CITY-ST-ZIP WINTER HAVEN FL ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE C
NAME SIMPSON, GARY
STREET ADDRESS 4205 THOMAS WOOD LANE, SW
CITY-ST-ZIP WINTER HAVEN FL ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE DS
NAME VAN HORN, SAMUEL
STREET ADDRESS 193 OAK TREE LANE, SW
CITY-ST-ZIP WINTER HAVEN FL ☒ Delete

TITLE DS
NAME RUNTENBAE HAROLD F
STREET ADDRESS 4615 CRESTWICKE DR.
CITY-ST-ZIP LAKE LAND, FL, 33801 ☐ Change ☒ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GARY Simpson

30 Jan 02

863-294-3481

Date

Daytime Phone #

CR2E037 (9/01)