2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 700920 1. Entity Name FIRST BAPTIST CHURCH OF GULF BREEZE, INC.

Principal Place of Business

FILED Feb 28, 2001 8:00 am Secretary of State

02-28-2001 90065 049 ****61.25

555 FAIRPOINT DRIVE GULF BREEZE FL 32561	555 FAIRPOINT DRIVE GULF BREEZE FL 32561	
2. Principal Place of Business	3. Malling Address	
Suita Ant # ata	Suito Apt # oto	

Mailing Address

2. Principal Pla	ace of Business		3. Mailing Address								
Suite, Apt. #	ie, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE						
City & State	!		City & State			4.	. FEI Numbe	FO-C010277			olied For Applicable
Zip		Country	Zip	Zip Country		5	5. Certificate of Status Desired See Require			8.75 Addi	tional
	6. Name and	d Address of Curren	t Registered Agent			7.	. Name and	Address of New Reg		<u>-</u>	
or manifestation of sealing and sealing an					Name	<u> </u>					
DECICIED TOTAL				Street Address (P.O. Box Number is Not Acceptable)							
REGISTER, JOHN F. 1167 JAGUAR CIR											
	EZE FL 3256°	1									
GULF DAL	LZE 1 J230	•			City	City FL Zip Code					
R The above	named ontity ex	hmite this statement	for the purpose of changing	a ite regieter	ad office or	registered	agent or bot	h in the state of Florid		<u> </u>	
o. The above	named entity st	iomas tras statement	for the purpose or changing	g its registere	eu onice oi	registered	agent, or bot	II, III the state of Florid	ld,		
SIGNATURE _							<u> </u>				
	Signature, typed or p	rinted name of registered age	ent and title if applicable.	(NOTE: Registere	d Agent signatui	re required whe	en reinstating)		DATE		
	FILE NO		9. Election Camp	_	40.0		00 May Be Make Check Payable to				
	FEE IS \$6	61.25	Trust Fund Col	ntribution.		Added to	Fees	Depa	rtment	of State	
10. OFFICERS AND DIRECTORS 11.			11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10						
TITLE	PD	OF TOERO / IND I	☑ Delete	TITL	E I	_	311101107011	THALE TO OTT TOLITE		☐ Change	Addition
NAME	FLOYD, WIS	E	Delete	NAM		P Robe	rt F	Noland			A
STREET ADDRESS	108 NORWIG			STR	ET ADDRESS			rvation Rd	1		
CITY-ST-ZIP	GULF BREE	ZE FL 32561		CITY	-ST-ZIP			ze, FL 325			
TITLE	SD		☑ Delete	TITL	E	V		20 111 3 2 1		☐ Change	Addition
NAME	Baker, Pet	Έ	,	NAN	IE .	-	is Hol	loway			
STREET ADDRESS	2820 OAK F	RIDGE		ı	EET ADDRESS		Navar				
CITY-ST-ZIP		ZE FL 32561		CITY	/-ST-ZIP			ze, FL 325	61		
TITLE	VPD	_	Delete	TITL	E	S		,		Change	Addition
NAME	REGISTER,			NAM	1	Mark	c Euba	nks			
STREET ADDRESS	1167 JAGU/				EET ADDRESS	5021	l Soun	dside Rd.			
CITY-ST-ZIP		ZE FL 32561		- GII	r-ST-ZIP	_Gulf	f Bree	ze, FL 325	561		
TITLE	D		☑ Delete	TITL	ì		ie Gib	ha		☐ Change	X Addition
NAME CEDEET ADDRESS	BULLA, BILL			NAM				us tman's Way	7		
STREET ADDRESS CITY-ST-ZIP	2963 BAY S				EET ADDRESS Y-ST-ZIP			ze, FL 325			
···	GOLF DREE	ZE FL 32561						20, 11 323		Change	Addition
TITLE NAME			☐ Delete	TITI NAI		Jim	Hales			unange	AUUIIION
STREET ADDRESS					EET ADDRESS		Sabin				
CITY-ST-ZIP					Y-ST-ZIP	1		Beach, FI	325	61	
TITLE			☐ Delete		ı.E					☐ Change	X Addition
NAME			L Delete	, NA		A. 1	L. Win	dlev			
STREET ADDRESS				STE	REET ADDRESS			ngton Ave.			
CITY-ST-ZIP				CIT	Y-ST-ZIP	1		ze. FL 32			

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

REGERT E. NOLAND

02-21-01

Daytime Phone #