## 2002 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 700946**

1. Entity Name

## BAYVISTA CHURCH OF CHRIST INC

Principal Place of Business 5460 7TH STREET SOUTH SAINT PETERSBURG FL 33705

2. Principal Place of Business

Mailing Address

5460 7TH STREET SOUTH SAINT PETERSBURG FL 33705

3. Mailing Address

FILED Sep 04, 2002 8:00 am Secretary of State

09-04-2002 90090 009 \*\*\*\*61.25

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Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State		City & State			4. FEI Number 59-2382217	Applied For Not Applicable
Zip	Country	Zip	Có	untry	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		
WARNOCK, FRED D. 5460 7TH ST. S. 853 69TH AVE. S. ST. PETERSBURG FL 33705			Street Address (P.O. Box Number is Not Acceptable)			
				City	FL	Zip Code
3. The above name the obligations	ned entity submits this statement of registered agent.	for the purpose of changir	ng its register	ed office or re	gistered agent, or both, in the State of Florida. I am	familiar with, and accept
	ature, typed or printed name of registered age	nt and title if applicable.	(NOTE: Registere	d Agent signature n	equired when reinstating) DATE	

After September 13, 2002, min. will be \$236.25.

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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE ☐ Change ■ Addition WARNOCK, FRED D. NAME STREET ADDRESS 5460 7TH ST. S. STREET ADDRESS CATY-ST-ZIP ST. PETERSBURG FL 33705 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME MCROY, WILLIAM NAME STREET ADDRESS 1221 FARU ISO ST. S. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>Saint Petersburg FL 33712</u> TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME Jenkins,, Granderson NAME STREET ADDRESS P.O. BOX 15068 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP <u>ST PETERSBURG FL 33733</u> TITLE PD ☐ Delete TITLE ☐ Change ☐ Addition NAME DUREN, L. W. NAME STREET ADDRESS 7974 SAILBOAT KEY BLVD. # 207 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAINT PETERSBURG FL 33707 ☐ Delete TITLE ☐ Change Addition NAME LATELERS, MILTON NAME STREET ADDRESS 355 55TH AVENUE SOUTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAINT PETERSBURG FL 33705 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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:

8/23/02 727816-0300