2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 702946

1. Entity Name

HOLLYWOOD BOULEVARD BAPTIST CHURCH, INC.



FILED May 01, 2003 8:00 am Secretary of State

05-01-2003 90772 015 ****61.25

				<i>37</i>				
		Mailing Address						
	DOD BLVD. S.E. BEACH FL 32548	204 HOLLYWOOD BLVD S I FT WALTON BCH FL 32548		(18.8416 18.841 A	2110 11918 (8211 BIBIN B211 BIBIT BIBIS	81811 818 11 81	0 51 0 5 0 11 6 0 01	
2. Principal Place of Business 3. M		3. Mailing Address	. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES			
City & State		City & State	City & State		4. FEI Number 59-6507326		Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of St	atus Desired Fe	8.75 Ad se Require]
	6. Name and Address of Current	Registered Agent		7. Name and Add	ress of New Registered Ag	ent]
سيدين ومواهدون ما المال الم			Name					
	A. HUMBER IKIN RD	se	Street Add	ress (P.O. Box Number is N	vot Acceptable)			
MARY E	IKIN RD STHER FL 32569 Char)]
			City	1,140	FL	Zip Coc	le	
	e named entity submits this statement for tions of registered agent.	r the purpose of changing its r	egistered office or re	gistered agent, or both, in	the State of Florida. I am far	niliar with,	and accept	
SIGNATURE	•							
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature	required when reinstating)	DATE			
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FILE NOW: FEE IS \$61.25			9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State			
	•			Added to 1 ees	rionua Departii	Jent Or	State	
10.	OFFICERS AND DIF	RECTORS	11.	ADDITIONS/CHANGI	ES TO OFFICERS AND DIRE	CTORS IN	10	1
TITLE	DT	☐ Delete	TITLE		(Change	☐ Addition	ଞ୍ଚ
NAME	HUMBER, PHILIP M		NAME	219 OKalousa	_ Kd. NE Beach F1 325			(10/02)
STREET ADDRESS	459 RANKIN RO.		STREET ADDRESS		2. 1 61 325	48		37
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NAME		☐ Delete	TITLE	bort walter R		Change	☐ Addition	15
	HUDSON, GLENN CLAY	☐ Delete	TITLE NAME	bort walter r			Addition	၂ၓ
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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 attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: X

STREET ADDRESS

City-St-ZIP

LEDUCATION CONTROLL M. PAGE

4-27-03 850-243-102