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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 JUL -7 PM 3:14

DOCUMENT # 704116

1. Entity Name

First Baptist Church of Holiday, INC.

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
4807 Mile Stretch Dr.	4807 Mile Stretch Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Holiday, FL	City & State: Holiday, FL
Zip: 34690 Country:	Zip: 34690 Country:

4. FEI Number: 592329865 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: John C Nichols Ruth Ponder

Street Address (P.O. Box Number is Not Acceptable)

7045 Vallejo Way 3450 Truman Dr

City: New Port Richey FL Zip Code: 34655 Holiday FL 34691

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Ruth Ponder Ruth Ponder 5-18-09

(Signature of registered agent or officer if applicable) (Typed or printed name of registered agent or officer if applicable) (NOTE: Registered Agent signature required for all filings) DATE

FEE IS $61.25 Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CMD John C. Nichols 7045 Vallejo Way New Port Richey, FL 34655
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Bette Warfel 5732 Mosaic Dr. Holiday, FL 34690
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Ruth Ponder 3450 Truman Dr. Holiday, FL 34691
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CR2E037B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Ruth Ponder Ruth Ponder 5-18-2009 727-937-3041

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone