

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 704679**

Entity Name

FLORIDA BAPTIST CHILDREN'S HOMES, INC.**FILED****Feb 20, 2002 8:00 am**
Secretary of State

02-20-2002 90070 016 ****70.00

Principal Place of Business

Mailing Address

1015 SIKES BLVD
LAKELAND FL 33815PO BOX 8190
LAKELAND FL 33815
US 33802

Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-0657326

Applied For

Not Applicable

Zip

33815

Country

Zip

33802

Country

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****HODGES, CHARLES**
1015 SIKES BLVD.
LAKELAND FL 33815

Name

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

City

FL

Zip Code

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 \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to**
Department of State**0. OFFICERS AND DIRECTORS****11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
CD	HAHN, JAMES P	1015 SIKES BLVD.	LAKELAND FL 33815				
VCD	PERRIN, JACKIE	1015 SIKES BLVD.	LAKELAND FL 33815	VCD	Broward Kittrell	1015 Sikes Blvd.	Lakeland, FL 33815
VCD	MELTON, RAY	1015 SIKES BLVD.	LAKELAND FL 33815				
P	HODGES, CHARLES	1015 SIKES BLVD.	LAKELAND FL 33815				
VP/T	JOHNSTON, STEVEN P	1015 SIKES BLVD.	LAKELAND FL 33815				

2. 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:**STEVEN P. JOHNSTON V.P. & CFO****2-5-02****863-687-8811**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)