

**2002 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # 708481**

1. Entity Name

**FIRST BAPTIST CHURCH OF BROOKSVILLE, FLORIDA****FILED****May 22, 2002 8:00 am**  
**Secretary of State**

05-22-2002 90175 002 \*\*\*\*61.25

Principal Place of Business

**420 NORTH HOWELL  
POST OFFICE BOX 1630  
BROOKSVILLE FL 34605-8630**

Mailing Address

**PO BOX 1630  
BROOKSVILLE FL 34605-1630  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number **59-0711168**

Applied For

Not Applicable

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

**HARRIS, TODD M  
1505 DON JR. AVENUE  
BROOKSVILLE FL 34601**

Name

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

City

**FL**

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

**FILE NOW: FEE IS \$61.25**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

TITLE **D** ☐ Delete  
NAME **CARTER, JAMES**  
STREET ADDRESS **366 GARFIELD AVENUE**  
CITY-ST-ZIP **MASARYKTOWN FL 34604**TITLE **D** ☐ Delete  
NAME **BLACKWELDER, FRED**  
STREET ADDRESS **22356 LACROSSE STREET**  
CITY-ST-ZIP **BROOKSVILLE FL 34601**TITLE **D** ☒ Delete  
NAME **BUTTELMAN, TOM**  
STREET ADDRESS **400 EDERINGTON DRIVE**  
CITY-ST-ZIP **BROOKSVILLE FL 34601**TITLE **D** ☐ Delete  
NAME **LAW, FRED**  
STREET ADDRESS **295 SUNSET DRIVE**  
CITY-ST-ZIP **BROOKSVILLE FL 34601**TITLE **D** ☐ Delete  
NAME **DEBUSK, EARL**  
STREET ADDRESS **804 HAMMOCK ROAD**  
CITY-ST-ZIP **BROOKSVILLE FL 34601**TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Jerry Walker** ☐ Change ☒ Addition  
NAME **26342 Whipperwill ST**  
STREET ADDRESS **Brooksville FL 34601**  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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:

**Todd M. Harris**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**4-29-02****796-6791**

CR2E037 (9/01)