

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 709093

1. Entity Name

EASTSIDE BAPTIST CHURCH OF PUNTA GORDA, FLORIDA

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90314 047 ****61.25

Principal Place of Business 6220 GOLF COURSE BLVD. PUNTA GORDA FL 33982	Mailing Address 6220 GOLF COURSE BLVD. PUNTA GORDA FLA 33982-1806
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2316468	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JONES, RAYMOND
 34999 WASHINGTON LOOP RD
 PUNTA GORDA FL 33982

7. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent signature required when reinstating) 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
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HUDSON, LARRY E 6826 SW BELVOIR DR ARCADIA FL 34266 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD JONES, RAYMOND 34999 WASHINGTON LOOP ROAD PUNTA GORDA FL 33982 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD CHEATHAM, ALTON 18151 WILD PEPPER CT. PUNTA GORDA FL 33982 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Jones, Raymond 34999 Washington Loop Road Punta Gorda, FL 33982 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Cheatham, Alton 18151 Wild Pepper Ct. Punta Gorda, FL 33982 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Hudson, Larry E. 6826 SW Belvoir Dr. Arcadia, FL 34266 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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: Raymond Jones **SIGNATURE REQUIRED** April 26, 2000 1-941-639-0242
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)