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

3/6

## FILED Mar 31, 2003 8:00 am Secretary of State

DOCUMENT # 709691 1. Entity Name BAY RIDGE BAPTIST CHURCH, INC.					03-06-2003	90114 034 ***	**61.25
Principal Place of Business 6155 113TH ST N SEMINOLE FL 33772	Mailing Address 6155 113TH ST N SEMINOLE FL 33772						
2. Principal Place of Business	3. Mailing Address		·				
Suite, Apt. #, etc.	Suite, Apt. #, etc.	uite, Apt. #, etc.		· CHECK HERE IF MAKING CHANGES			
City & State	City & State	City & State		4. FEI Number 59-6172504 Applied For Not Applied be			
Zip Country	Zip Country		ilry	5. Certificate of S	tatus Desired	\$8.75 Ad	ditional
6. Name and Address of Current	Registered Agent			7. Name and Add	dress of New Regis	<del></del>	
			Name Non	ris l	6		
KEMP, CHARLES		_; ~:	Street Address (	(P.O. Box Number is Not Acceptable)			
6805 VERSAILLES PINELLAS PARK FL 33781		H	<u> </u>		7	1	
		L	2148	1741	<u>4 re</u> 5	<u>.ω.</u>	
		ł	citylarg	0		FL 광우	974
8. The above named entity submits this statement for	or the purpose of changing	its registered	office or register	ed agent, or both, in	the State of Florida	ı. I am familiar with,	and accept
the obligations of registered agent.				•		- / /	
SIGNATURE AND COMMENT						2/9/03 .DATE1	
Signature, typed or punity name of registered agent	and title if applicable. (N	OTE: Registered A	Agent eignature required	when reinstating)	: 1 12	DATE	
	<del></del>	<del></del>	<del></del>	-	T		
FILE NOW: FEE IS \$61.25	9. Election C Trust Fund	ampaign Fin Contribution		\$5.00 May Be Added to Fees		Check Payable Department of S	
10. OFFICERS AND DI	RECTORS	11.		ADDITIONS/CHANG	ES TO OFFICERS /	AND DIRECTORS IN	110
TITLE VCD	☐ Delete	THILE	(V) Sec	retary of	Board	Change	
NAME SANTHOUSE, JACK		NAME	5an	Thouse,	Sack N		Addition CO
STREET ADDRESS 8959 110TH LN N CITY-ST-ZIP SEMINOLE FL 33722		STREET CITY-S		59, 110	FC 337		83
TITLE CD SEMINOLE FL 33722	Delete	TITLE	Je 7	nivole,	1-6 331	Change	Addition C
NAME KEMP, CHARLES	CEREE	NAME			,	, The change	C) MONITOR   D
STREET ADDRESS 6805 VERSAILLES	•	STREET	ADDRESS				ľ
CITY-ST-ZIP PINELLAS PARK FL 33781		CiTY-S	_				
TITLE XD	☐ Defete	TITLE	-\ Z-1-1	rd Mem	7-7-a	(X) Change	Addition
NAME LAURENZO, PETER STREET ADDRESS 12278 MONARCH CIR		- NAME	ADDRESS /22	TENZO, 7	rch Cir	•	
CITY-ST-ZIP SEMINOLE FL 33772		CITY-S	T-ZIP	NINOLE F	-/ 3377	7.2	
TILE T	Delete	TITLE		,		☐ Change	☐ Addition
NAME HOUFF, JIM Preasu	uer Delete	NAME			•	Change	☐ Addition
STREET ADDRESS 10023 109TH ST N	uer Delete	name Street	ADDRESS		•	☐ Change	☐ Addition
STREET ADDRESS 10023 109TH ST N SEMINOLE FL 33772	·	NAME STREET CITY-ST	ADDRESS				
STREET ADDRESS 10023 109TH ST N SEMINOLE FL 33772 TITLE 1	Delete	name Street	ADDRESS			☐ Change	Addition
STREET ADDRESS 10023 109TH ST N CITY-ST-ZIP SEMINOLE FL 33772 TITLE D	·	NAME STREET CITY-ST TITLE HAME STREET	ADDRESS		-		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP D23 109TH ST N SEMINOLE FL 33772  TOTAL D D D D DRESS CITY-ST-ZIP PINELLAS PARK FL 33782	·	NAME STREET CITY-ST TITLE NAME	ADDRESS T-ZIP  ADDRESS T-ZIP			☐ Change	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE D 10023 109TH ST N SEMINOLE FL 33772 TIT	·	NAME STREET CITY-ST TITLE NAME STREET CITY-ST	ADDRESS 1-ZIP ADDRESS 1-ZIP D Cha	irman of	Board		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE D NAME STREET ADDRESS CITY-ST-ZIP TITLE D NORRIS, JOHN	☐ Delete	NAME STREET CITY-S' TITLE NAME STREET CITY-SI TITLE NAME	ADDRESS 1-ZIP ADDRESS 1-ZIP D Cha	irman of	Board re Sw	☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE D 10023 109TH ST N SEMINOLE FL 33772 TIT	☐ Delete	NAME STREET CITY-S' TITLE NAME STREET CITY-SI TITLE NAME	ADDRESS 1-ZIP  ADDRESS 1-ZIP  D Chai	irman of	Board re SW 33774	☐ Change	Addition

2. Thereby certify that the information supplied with risk introduces not quality for the exemption stated in Section 118. 10/13(t), Horida Statutes. 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

LIGNIZUEE REQUIRED

2/9/07

727-584-6252