

4/25/

**FILED**  
**May 23, 2001 8:00 am**  
**Secretary of State**

04-25-2001 90177 034 \*\*\*\*61.25

**2001 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # 711454**

1. Entity Name

**CORNERSTONE BAPTIST CHURCH OF PENSACOLA, INC.**

Principal Place of Business

Mailing Address

**4000 WEST FAIRFIELD DRIVE  
PENSACOLA FL 32505**

**4000 WEST FAIRFIELD DRIVE  
PENSACOLA FL 32505**

2. Principal Place of Business

**5454 Mobile Hwy.**

3. Mailing Address

**5454 Mobile Hwy.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**Pensacola, FL.**

City & State  
**Pensacola, FL.**

4. FEI Number

**JK 59-1222322**

**APPLIED FOR**

Applied For

Not Applicable

Zip  
**32526**

Country  
**Escambia**

Zip  
**32526**

Country  
**Escambia**

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

**SMITH, BOBBY LEE  
2681 TINOSA LANE  
PENSACOLA FL 32526**

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: If 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**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D/T  
PHELPS, BILL  
103 GEORGIA DR  
PENSACOLA FL**  Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D/T  
Ziegler, Ron  
1496 Water Oak Trail  
Cantonment, FL 32533**  Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S/T  
FAY, FRANK  
2681 TINOSA LN  
PENSACOLA FL**  Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D/T  
Fay, Frank  
4531 Guerlain Way  
Pensacola, FL 32505**  Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
REAVES, HARVEY  
225 EMERALD AVE.  
PENSACOLA FL**  Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D/T  
Padgett, Buddy  
706 Edison Dr.  
Pensacola, FL 32505**  Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
SMITH, BOBBY LEE  
2681 TINOSA LANE  
PENSACOLA FL**  Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**[Blank]**  Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S/T  
FAY, MARSHA  
4531 GUERLAIN WAY  
PENSACOLA FL**  Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**[Blank]**  Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**[Blank]**  Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**[Blank]**  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: *Bobby Lee Smith* *Buddy Lu Padgett*

**4-18-01**

**453-8500**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)