


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

FILED
Apr 15, 2003 8:00 am
Secretary of State

04-15-2003 90095 038 ****61.25

DOCUMENT # 713800

1. Entity Name
**FIRST BAPTIST CHURCH OF FORT MYERS BEACH,
FLORIDA, INC.**



Principal Place of Business
P.O. BOX 2402
FT. MYERS BEACH, FL 33932

Mailing Address
P.O. BOX 2402
FT. MYERS BEACH, FL 33932

90087163



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
Suite, Apt. #, etc.
City & State

3. Mailing Address
Suite, Apt. #, etc.
City & State

Zip Country Zip Country

4. FEI Number **59-2495484**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HOUSTON, JACK D
3810 ESTERO BLVD.
FT. MYERS BEACH, FL 33931**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Jack Houston* DATE **4-8-03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW - FEES \$61.25

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	T	<input type="checkbox"/> Delete
NAME	JOHNSON, JERALD L	
STREET ADDRESS	87 STEVENS BLVD--	
CITY-ST-ZIP	FT MYERS, FL--	
TITLE	T	<input type="checkbox"/> Delete
NAME	GARDNER, JACK	
STREET ADDRESS	480 DONORA	
CITY-ST-ZIP	FT MYERS, FL 33931	
TITLE	D	<input type="checkbox"/> Delete
NAME	HOUSTON, JACK D	
STREET ADDRESS	3810 ESTERO BLVD.	
CITY-ST-ZIP	FT MYERS, FL--	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	17660 Stevens Blvd.	
CITY-ST-ZIP	Fort Myers Beach, Fl 33931	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	Fort Myers Beach, FL 33931	
CITY-ST-ZIP	Fort Myers Beach, FL 33931	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 or other like empowered.

SIGNATURE: *Jack Houston* **Jack D. Houston** DATE **4-8-03** **239-463-6452**

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/02)