

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2002 8:00 am
Secretary of State

02-24-2002 90042 013 ****61.25

DOCUMENT # 714183

1. Entity Name

FIRST BAPTIST CHURCH OF KEY LARGO, INC.

Principal Place of Business

Mailing Address

**99001 OVERSEAS HIGHWAY
 KEY LARGO FL 33037**

**99001 OVERSEAS HIGHWAY
 KEY LARGO FL 33037**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1088214

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BRISHKE, PAUL
 445 LIME DRIVE
 KEY LARGO FL 33037**

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

PAUL BRISHKE

CHAIRMAN OF DEACONS, DIRECTOR FEBRUARY 12, 2002

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

(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**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	CDD	<input type="checkbox"/> Delete
NAME	BRISHKE, PAUL	
STREET ADDRESS	445 LIME DR	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	VCDD	<input type="checkbox"/> Delete
NAME	FITZPATRICK, ROBERT	
STREET ADDRESS	164 MOHAWK ST	
CITY-ST-ZIP	TAVERNIER FL 33070	
TITLE	DD DD	<input type="checkbox"/> Delete
NAME	WEAVER, WILLIAM	
STREET ADDRESS	131 MOHAWK ST	
CITY-ST-ZIP	TAVERNIER FL 33070	
TITLE	DD SDD	<input type="checkbox"/> Delete
NAME	FINCH, BILL JR	
STREET ADDRESS	416 MAHOGANY AVE	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	DD DD	<input type="checkbox"/> Delete
NAME	GREWE, PAUL	
STREET ADDRESS	167 COCONUT ROW	
CITY-ST-ZIP	TAVERNIER FL 33070	
TITLE	ASD	<input type="checkbox"/> Delete
NAME	COTTRELL, GORDON	
STREET ADDRESS	7 CORRINE PL	
CITY-ST-ZIP	KEY LARGO FL 33037	

TITLE	DD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARLLEE, JOHN W., JR.	
STREET ADDRESS	10980 COUNTY RD. 905	
CITY-ST-ZIP	KEY LARGO, FL 33037	
TITLE	DD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAHAM, DAVID	
STREET ADDRESS	12 BOWEN DR.	
CITY-ST-ZIP	KEY LARGO, FL 33037	
TITLE	DD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LESCALLEET, TIM	
STREET ADDRESS	115 STARFISH LANE	
CITY-ST-ZIP	TAVERNIER, FL 33070	
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 all other files empowered.

SIGNATURE:

PAUL BRISHKE

FEBRUARY 12, 2002 (305) 451-2265

CR2E037 (9/01)