

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

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90312 035 ****61.25

DOCUMENT # 714183

1. Entity Name
FIRST BAPTIST CHURCH OF KEY LARGO, INC.



Principal Place of Business
**99001 OVERSEAS HIGHWAY
KEY LARGO FL 33037**

Mailing Address
**99001 OVERSEAS HIGHWAY
KEY LARGO FL 33037**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1088214**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

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

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

**PAUL BRISHKE
CHAIRMAN OF DEACONS, DIRECTOR** **JANUARY 13, 2003**

(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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **CDD** Delete
NAME **BRISHKE, PAUL**
STREET ADDRESS **445 LIME DR**
CITY-ST-ZIP **KEY LARGO FL 33037**

TITLE **CHANGE: DD** Change Addition
NAME **WEAVER, WILLIAM**
STREET ADDRESS **131 MOHAWK ST.**
CITY-ST-ZIP **TAVERNIER, FL 33070**

TITLE **VCDD** Delete
NAME **FITZPATRICK, ROBERT**
STREET ADDRESS **164 MOHAWK ST**
CITY-ST-ZIP **TAVERNIER FL 33070**

TITLE **CHANGE: SDD** Change Addition
NAME **FINCH, BILL (jr.)**
STREET ADDRESS **416-MAHOGANY-AVE.**
CITY-ST-ZIP **KEY LARGO, FL 33037**

TITLE **VCDD** Delete
NAME **WEAVER, WILLIAM**
STREET ADDRESS **131 MOHAWK ST**
CITY-ST-ZIP **TAVERNIER FL 33070**

TITLE **CHANGE: DD** Change Addition
NAME **GREWE, PAUL**
STREET ADDRESS **167 COCONUT ROW**
CITY-ST-ZIP **TAVERNIER, FL 33070**

TITLE **DD** Delete
NAME **FINCH, BILL JR**
STREET ADDRESS **416 MAHOGANY AVE**
CITY-ST-ZIP **KEY LARGO FL 33037**

TITLE **DD** Change Addition
NAME **HARLLEE, JOHN W. (Jr.)**
STREET ADDRESS **10980 COUNTY RD. 905**
CITY-ST-ZIP **KEY LARGO, FL 33037**

TITLE **SDD** Delete
NAME **GREWE, PAUL**
STREET ADDRESS **167 COCONUT ROW**
CITY-ST-ZIP **TAVERNIER FL 33070**

TITLE **DD** Change Addition
NAME **GRAHAM, DAVID**
STREET ADDRESS **12 BOWEN DR.**
CITY-ST-ZIP **KEY LARGO, FL 33037**

TITLE **ASD** Delete
NAME **COTTRELL, GORDON**
STREET ADDRESS **7 CORRINE PL**
CITY-ST-ZIP **KEY LARGO FL 33037**

TITLE **DD** Change Addition
NAME **LESCALLEET, TIM**
STREET ADDRESS **115 STARFISH LANE**
CITY-ST-ZIP **TAVERNIER, FL 33070**

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: **PAUL BRISHKE**

JANUARY 13, 2003 (305) 451-2265

CR2E037 (10/02)