2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 718577

Entity Name: APOPKA BAPTIST TEMPLE, INC.

FILED Jun 30, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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115 N CHRISTINA AVE. 115 N CHRISTIANA AVE. APOPKA, FL 32703 APOPKA, FL 32703

Current Mailing Address: New Mailing Address:

P.O. BOX 2505 115 N. CHRISTIANA AVE. APOPKA, FL 32704 APOPKA, FL 32703

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LOOMIS, EDWARD W 715 EAST ORANGE STREET APOPKA, FL 32703

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition RIGGS, RUSSELLE WILSON, THOMAS Name: Name:

Address: 115 N. CHRISTINA AVENUE Address: 240 PINE TREE DR. City-St-Zip: APOPKA, FL 32703 City-St-Zip: CASSELBERRY, FL 32707

Title: () Delete Title: () Change () Addition

Name: LOOMIS, EDWARD Name: Address: 715 E. ORANGE STREET Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip:

Title: () Delete Title: (X) Change () Addition WILSON, RONALD Name: OWENS, DAVID Name:

231 PLAZA OVAL DRIVE 2375 PARTNERSHIP HILLS DR. Address: Address:

City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: APOPKA, FL 32712

Title: sv (X) Delete Title: () Change () Addition

Name: WILSON, TIM Name: 1893 IROQUIOS ST. Address: Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD W. LOOMIS TD 06/30/2003