2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 719378

FILED
Feb 24, 2000 8:00 am
Secretary of State
02-24-2000 90009 011 ****70.00

1. Entity Name

HERITAGE BIBLE CHURCH, INC.

Principal Place of Business	Mailing Address
~~1004 CHESNUT AVENUE , BOX 4336~~ ~~PANAMA CITY FL 32401~~	~~1004 CHESNUT AVENUE , BOX 4336~~ ~~PANAMA CITY FL 32401-0336~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3380 State Ave	3380 State Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Panama City, FL	City & State: Panama City, FL
Zip: 32405 Country:	Zip: 32405 Country:

4. FEI Number: 59-2590133 ☐ Applied For ☐ Not Applicable

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
HAZARD, HENRY 1137 GRACE AVE. PANAMA CITY FL 32401	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: Henry Hazard Pastor Henry Hazard 2/4/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's 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	~~P~~ D	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	COYNE, MIKE		NAME	
STREET ADDRESS	4418 FLETCHER STREET		STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY FL 32405		CITY-ST-ZIP	
TITLE	P	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	HAZARD, HENRY		NAME	
STREET ADDRESS	1137 GRACE AVE		STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY, FL 0		CITY-ST-ZIP	
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	SMITH, TOMMY		NAME	
STREET ADDRESS	6532 WAVERLY ST		STREET ADDRESS	
CITY-ST-ZIP	YOUNGSTOWN FL		CITY-ST-ZIP	
TITLE	~~D~~ C	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CROWE, KEN		NAME	
STREET ADDRESS	2362 FOXWORTH DR.		STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY FL		CITY-ST-ZIP	
TITLE	~~D~~	☒ Delete	TITLE	☐ Change ☐ Addition
NAME	~~BAREFIELD, MARGARET~~		NAME	
STREET ADDRESS	~~3920 PRINCESS LANE~~		STREET ADDRESS	
CITY-ST-ZIP	~~PANAMA CITY FL~~		CITY-ST-ZIP	
TITLE	D.	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	John Camperman		NAME	
STREET ADDRESS	1835 Airport Cir		STREET ADDRESS	
CITY-ST-ZIP	Panama City, FL 32405		CITY-ST-ZIP	

CR2E037 (9/99)

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: Henry Hazard SIGNATURE REQUIRED 2/4/00 (850) 785-9897
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #