2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#720106

Entity Name: SOUTH DADE BAPTIST CHURCH, INC.

FILED May 20, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 17105 S.W. 296 ST. P.O. BOX 1589 HOMESTEAD, FL 330908589 **New Mailing Address: Current Mailing Address:** 17105 S.W. 296 ST. P.O. BOX 1589 HOMESTEAD, FL 330908589 FEI Number: 59-1141825 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PARKER, CURTIS W FRYER, JAMES C FRYER 17105 SW 296 ST. 17105 SW 296 ST. HOMESTEAD, FL 33030 HOMESTEAD, FL 33030 US US 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: JAMES C. FRYER 05/20/2003 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition BITNER, ROBERT FRYER, JAMES C Name: Name: 1371 N FIELDLOCK LANE Address: 17105 SW 296 STREET Address: HOMESTEAD, FL 33035 City-St-Zip: City-St-Zip: HOMESTEAD, FL 33030 US Title: Title: (X) Change () Addition () Delete MORRISSEY, JOHN Name: Name: EBERSOLE, TIM Address: 29840 SW 172ND AVENUE Address: 17340 SW 301 ST HOMESTEAD, FL 33030 US City-St-Zip: HOMESTEAD, FL 33030 City-St-Zip: Title: () Delete Title: () Change () Addition SCHLICHT, KURT Name: Name: 20220 SW 315TH STREET Address: Address: City-St-Zip: HOMESTEAD, FL 33030 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: MARTSCHINSKE, DON Address: Address: 52 NW 18 STREET City-St-Zip: City-St-Zip: HOMESTEAD, FL 33035 US Title: () Delete Title: () Change (X) Addition HAYNES, BENJAMIN Name: Name: 245 NE 18TH STREET Address: Address: City-St-Zip: City-St-Zip: HOMESTEAD, FL 33030

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: JAMES C. FRYER C 05/20/2003