

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 720841

1. Entity Name

THE FLORIDA GENERAL BAPTIST CONVENTION, INC.

FILED
Jan 21, 2000 8:00 am
Secretary of State

01-21-2000 90075 035 ****61.25

Principal Place of Business 11591 S.W. 220TH STREET MIAMI FL 33170-2939	Mailing Address 11591 S.W. 220TH STREET MIAMI FL 33170-2939
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DO NOT WRITE IN THIS SPACE

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 59-2209109	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

WISE, JAMES C REV.
11591 S.W. 220TH STREET
MIAMI FL 33170-2939

7. Name and Address of New Registered Agent

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 _____
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. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> Delete
NAME	ALLEN, J.T. REV.
STREET ADDRESS	4358 CYNTHIA STREET
CITY-ST-ZIP	ORLANDO FL 32811
TITLE	D <input type="checkbox"/> Delete
NAME	ALLEN, O.C. REV.
STREET ADDRESS	1161 N.W. 29TH TERRACE
CITY-ST-ZIP	FT. LAUDERDALE FL 33311
TITLE	D <input type="checkbox"/> Delete
NAME	BANKS, CHARLES REV.
STREET ADDRESS	1836 WEST 23RD STREET
CITY-ST-ZIP	JACKSONVILLE FL 32209
TITLE	D <input type="checkbox"/> Delete
NAME	BELL, W.C. REV.
STREET ADDRESS	3430 N.W. 2ND STREET
CITY-ST-ZIP	FT. LAUDERDALE FL 33311
TITLE	D <input type="checkbox"/> Delete
NAME	BENTLEY, J.C. REV.
STREET ADDRESS	415 N. FREDERICK AVENUE
CITY-ST-ZIP	DAYTONA BEACH FL 32114
TITLE	D <input type="checkbox"/> Delete
NAME	BENTLEY, NAOMI
STREET ADDRESS	415 N. FREDERICK AVENUE
CITY-ST-ZIP	DAYTONA BEACH FL 32114

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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	
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	
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 like empowered.

SIGNATURE: Rev James C. Wise 01-13-00 305 253 2945
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)