

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90085 038 ****61.25

DOCUMENT # 721071

1. Entity Name

SIMMONS LOOP BAPTIST CHURCH, INC.

Principal Place of Business

Mailing Address

**6610 SIMMONS LOOP
RIVERVIEW FL 33569**

**6610 SIMMONS LOOP
RIVERVIEW FL 33569-9494**

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

59-1677093

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

**FOX, MICHAEL W REV
6610 SIMMONS LOOP
RIVERVIEW FL 33569**

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. ☐

\$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

T	☐ Delete
CARLTON, FLOYD	
10415 CONE GROVE ROAD	
RIVERVIEW FL 33569	
D	☐ Delete
PETERSON, WALLACE	
12846 A HWY 301 S	
RIVERVIEW FL 33569	
D	☐ Delete
PETERSON, MRS. LINDA	
12846 A. HWY. 301 S.	
RIVERVIEW FL 33569	
D	☐ Delete
LAMBERT, MRS. GLENNISE	
509 FLORIDA CIR. SO.	
APOLLO BEACH FL 33572	
☐ Delete	
☐ Delete	

☐ Change ☐ Addition
☐ Change ☐ Addition
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☐ Change ☐ Addition

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:

GLENNISE LAMBERT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LAMBERT

7 Jan 2000

813-677-9310

Date

Daytime Phone #

CR2E037 (9/99)