

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 25, 2002 8:00 am**  
**Secretary of State**

03-25-2002 90094 042 \*\*\*\*61.25

0041589

**DOCUMENT # 722052**

1. Entity Name

**GATEWAY BAPTIST CHURCH OF ST. PETERSBURG, FLORIDA, INC.**

Principal Place of Business

Mailing Address

ST. PETERSBURG-FLORIDA INC  
 7700 16TH ST N  
 ST PETERSBURG FL 33702

ST PETERSBURG FLORIDA INC  
 7700 16TH ST N  
 ST PETERSBURG FL 33702

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-1370061**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GIBBS, ERNEST JR**  
**3724 GREENFORD ST.**  
**VALRICO FL 33594**

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

*Ernest Gibbs Jr*  
**Ernest Gibbs Jr**

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  
 NAME **APPLETON, MARTHA**  
 STREET ADDRESS **6320 13TH ST. NORTH**  
 CITY-ST-ZIP **SAINT PETERSBURG FL 33702**

Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

D  Delete  
 NAME **WILEY, CHARLES**  
 STREET ADDRESS **6311 16TH STREET N**  
 CITY-ST-ZIP **ST. PETERSBURG.FL**

Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

S  Delete  
 NAME **NEENER, ANN**  
 STREET ADDRESS **6625 23 CIRCLE N.**  
 CITY-ST-ZIP **ST. PETERSBURG FL 33702**

Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

D  Delete  
 NAME **GIBBS, ERNIE**  
 STREET ADDRESS **3724 GREENFORD ST**  
 CITY-ST-ZIP **VALRICO FL 33594**

Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

D  Delete  
 NAME **DECK, PAUL**  
 STREET ADDRESS **6523 22ND STREET N.**  
 CITY-ST-ZIP **ST. PETERSBURG FL 33702**

Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

Change  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 and all other like empowered.

SIGNATURE:

*Ernest Gibbs Jr*  
**Ernest Gibbs Jr**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/10/02**

Date

Daytime Phone #

CR2E037 (9/01)