

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90746 019 ****61.25

DOCUMENT # 722463
1. Entity Name
FIRST BAPTIST CHURCH OF FRUITLAND PARK, INC.



Principal Place of Business Mailing Address
509 WEST BERCKMAN STREET **509 WEST BERCKMAN STREET**
FRUITLAND PARK FL 34731 **FRUITLAND PARK FL 34731**

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State

4. FEI Number **59-0688958** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
TAYLOR, LAWRENCE E - ATTORNEY
1029 W MAGNOLIA ST
P. O. BOX 477
LEESBURG FL 34748

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

| | | |
|----------------|--|--|
| TITLE | TR | <input checked="" type="checkbox"/> Delete |
| NAME | RONDEAU, PAUL | |
| STREET ADDRESS | 18654 SE 24 PL | |
| CITY-ST-ZIP | SILVER SPRINGS FL 34488 | |
| TITLE | STR | <input type="checkbox"/> Delete |
| NAME | KENT, BARRY | |
| STREET ADDRESS | 2290 KNOXWOOD DR 5142 Magnolia Ridge Rd | |
| CITY-ST-ZIP | LEESBURG FL 34748 Fruitland Park, FL 34731 | |
| TITLE | TR | <input checked="" type="checkbox"/> Delete |
| NAME | OSBOURNE, BILLY | |
| STREET ADDRESS | 9 CAPTAINS POINT | |
| CITY-ST-ZIP | FRUITLAND PARK FL 34731 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|----------------|--|--|
| TITLE | TR | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Barry Kent | |
| STREET ADDRESS | 5142 Magnolia Ridge Rd. Address change | |
| CITY-ST-ZIP | Fruitland Park, FL 34731 | |
| TITLE | TR | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Mitch Anderson | |
| STREET ADDRESS | 7477 Sunnyside Dr. | |
| CITY-ST-ZIP | Leesburg, FL 34748 | |
| TITLE | TR | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Keith Sumner | |
| STREET ADDRESS | 05345 Twin Palms Rd. | |
| CITY-ST-ZIP | Fruitland Park, FL 34731 | |
| TITLE | TR | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Stewart Perdue | |
| STREET ADDRESS | 9300 CR 128C | |
| CITY-ST-ZIP | Wildwood, FL 34785 | |
| TITLE | TR | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Larry Meeks | |
| STREET ADDRESS | 4034 Magnolia Dr. | |
| CITY-ST-ZIP | Leesburg, FL 34748 | |
| 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: _____ **SIGNATURE REQUIRED**

CR2E037 (10/02)