

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2002 8:00 am
Secretary of State

03-14-2002 90061 033 ****70.00

DOCUMENT # 726731

1. Entity Name

FIRST BAPTIST CHURCH OF GRAY GABLES, INC.

Principal Place of Business

Mailing Address

3158 SOUTH KINGS ROAD
 PO BOX 629
 CALLAHAN FL 32011
 US

CHURCH ROAD AND U S 1
 PO BOX 629
 CALLAHAN FL 32011

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

59-1724515

Applied For

Not Applicable

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

JACKSON, BILLY RAY
4511 CHURCH RD
CHURCH ROAD
CALLAHAN FL 32011

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

Billy Ray Jackson

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/17/02

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

TITLE: PD Trustee Delete
 NAME: JACKSON, BILLY R
 STREET ADDRESS: RT. 4, BOX 649 CHURCH RD 4511 Church Rd
 CITY-ST-ZIP: CALLAHAN, FL 32011 32011

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: D Trustee Delete
 NAME: SALTFOORD, REBECCA
 STREET ADDRESS: 4591 MAPLEWOOD COURT
 CITY-ST-ZIP: CALLAHAN FL 32011

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: VPD Trustee Delete
 NAME: BRADDOCK, L L
 STREET ADDRESS: 4655 MCKENDREE DR 4679
 CITY-ST-ZIP: CALLAHAN FL 32011

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: ~~D~~ Delete
 NAME: ~~SMITH, FRANK~~
 STREET ADDRESS: ~~5388 RATLIFF RD~~
 CITY-ST-ZIP: ~~CALLAHAN FL 32011~~

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Ken Alderman Delete
 NAME: Ken Alderman
 STREET ADDRESS: 3887 Ogilvie Rd
 CITY-ST-ZIP: Callahan, FL 32011 Trustee

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: 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

Billy Ray Jackson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/17/02

Date

Daytime Phone #

CR2E037 (9/01)