

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

**FILED**  
**Jan 09, 2003 8:00 am**  
**Secretary of State**

01-09-2003 90063 033 \*\*\*\*61.25

**DOCUMENT # 729226**

1. Entity Name

**COMMUNITY BIBLE CHURCH, INC.**



Principal Place of Business

**3041 KIRK RD.  
LAKE WORTH FL 33461**

Mailing Address

**3041 KIRK RD.  
LAKE WORTH FL 33461**

2. Principal Place of Business

3. Mailing Address

**2736 EXUMA RD**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**WEST PALM BEACH, FL**

Zip

Country

Zip

Country

**33406**

4. FEI Number **23-7377447-  
33-1034201**

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

**DUKES, I RAY**

**732 BEECH RD**

**WEST PALM BEACH FL 33409**

Name

Street Address (P.O. Box Number is Not Acceptable)

**2736 EXUMA RD**

City

**West Palm Beach**

FL

Zip Code

**33406**

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

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete  
NAME **DUKES, RAY**  
STREET ADDRESS **2736 EXUMA RD.**  
CITY-ST-ZIP **WEST PALM BEACH FL 33406**

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

TITLE **PD** ☐ Delete  
NAME **DUKES, RAY**  
STREET ADDRESS **732 BEECH RD**  
CITY-ST-ZIP **W PALM BCH FL**

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

TITLE **D** ☐ Delete  
NAME **LEPPERT, WILLIAM**  
STREET ADDRESS **251 GREGORY PLACE**  
CITY-ST-ZIP **WEST PALM BEACH FL 33406**

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

TITLE **D** ☐ Delete  
NAME **HALL, KEN**  
STREET ADDRESS **8085 3RD PLACE SOUTH**  
CITY-ST-ZIP **WEST PALM BEACH FL 33411**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ 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, with all other like empowered.

SIGNATURE:

**Ray Dukes**

**1/5/03**

**561-966-6162**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)

DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
PHILADELPHIA PA 19255

*Attach new f*  
*Doc. # 22926*  
*30003668*  
DATE OF THIS NOTICE: 12-26-2002  
NUMBER OF THIS NOTICE: CP 575 E  
EMPLOYER IDENTIFICATION NUMBER: 33-1034201  
FORM: SS-4  
0532642186 0

COMMUNITY BIBLE CHURCH  
% RAY DUKES  
2736 EXUMA RD  
WEST PALM BEACH FL 33406

FOR ASSISTANCE CALL US AT:  
1-800-829-1040

OR WRITE TO THE ADDRESS  
SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE  
STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

Thank you for your Form SS-4, Application for Employer Identification Number (EIN). We assigned you EIN 33-1034201. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Use your complete name and EIN shown above on all federal tax forms, payments and related correspondence. If you use any variation in your name or EIN, it may cause a delay in processing and incorrect information in your account. It also could cause you to be assigned more than one EIN.

If you want to apply to receive a ruling or a determination letter recognizing your organization as tax exempt, and have not already done so, you should file Form 1023/1024, Application for Recognition of Exemption, with the IRS Ohio Key District Office. Publication 557, Tax Exempt Status for Your Organization, is available at most IRS offices and has details on how you can apply.

Keep this part for your records.

CP 575 E (Rev. 1-

Return this part with any correspondence  
so we may identify your account. Please  
correct any errors in your name or address.

CP 575 E

0532642186

Your Telephone Number Best Time to Call  
( )

DATE OF THIS NOTICE: 12-26-2002  
EMPLOYER IDENTIFICATION NUMBER: 33-1034201  
FORM: SS-4

INTERNAL REVENUE SERVICE  
PHILADELPHIA PA 19255

COMMUNITY BIBLE CHURCH  
% RAY DUKES  
2736 EXUMA RD  
WEST PALM BEACH FL 33406