

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 30, 2002 8:00 am**  
**Secretary of State**

09-30-2002 90179 039 \*\*\*\*70.00

**DOCUMENT # 729760**

1. Entity Name

**TRUSTEE CORPORATION OF THE FIRST BAPTIST CHURCH OF ZEPHYRHILLS, INC.**

Principal Place of Business

Mailing Address

~~38300 5TH AVE~~  
 ZEPHYRHILLS FL 33541-4976

~~38300 5TH AVE~~  
 ZEPHYRHILLS FL 33541-4976

2. Principal Place of Business

**38231 5th Avenue**

Suite, Apt. #, etc.

3. Mailing Address

**38231 5th Avenue**

Suite, Apt. #, etc.

City & State

**Zephyrhills, FL**

Zip

**33542**

Country

**USA**

City & State

**Zephyrhills, FL**

Zip

**33542**

Country

**USA**

4. FEI Number

**59-0700562**

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

**ODOM, STEPHEN T.**

~~38300 FIFTH AVENUE~~  
**ZEPHYRHILLS FL 33541**

7. Name and Address of New Registered Agent

Name

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

**38231 Fifth Avenue**

City

**Zephyrhills**

**FL**

Zip Code

**33542**

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

**After September 13, 2002, min. will be \$236.25.**

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 NAME	<b>T FERGUSON, RODNEY</b>	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	<b>38136 ARCHER AVE.</b>	
CITY-ST-ZIP	<b>ZEPHYRHILLS FL</b>	
TITLE NAME	<b>TS BARRENTINE, RON</b>	<input type="checkbox"/> Delete
STREET ADDRESS	<b>34540 APPALOOSA TR</b>	
CITY-ST-ZIP	<b>ZEPHYRHILLS FL</b>	
TITLE NAME	<b>T EVANS, GEORGE</b>	<input type="checkbox"/> Delete
STREET ADDRESS	<b>6917 LUM DRIVE</b>	
CITY-ST-ZIP	<b>ZEPHYRHILLS FL 33541</b>	
TITLE NAME	<b>TCP KLINE, NORMAN G JR</b>	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	<b>3946 LANIER ROAD</b>	
CITY-ST-ZIP	<b>ZEPHYRHILLS FL 33541</b>	
TITLE NAME	<b>T CHRISTY, DONALD P</b>	<input type="checkbox"/> Delete
STREET ADDRESS	<b>34135 TREE LAKE DRIVE</b>	
CITY-ST-ZIP	<b>ZEPHYRHILLS FL 33543</b>	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

TITLE NAME	<b>T Potter, Thomas Edward</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	<b>7735 Shannon Lane</b>	
CITY-ST-ZIP	<b>Zephyrhills, FL 33540</b>	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	<b>TCP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	<b>T Day Smith</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	<b>30857 County Rd 54</b>	
CITY-ST-ZIP	<b>Wesley Chapel, FL 33543</b>	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

CR2E037 (4/02)

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**

**7/23/02**