

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90050 023 ****61.25

DOCUMENT # 730612

1. Entity Name

FIRST BAPTIST CHURCH OF PLEASANT GROVE, INC.

Principal Place of Business

7725 TURKEY CREEK RD
 P.O. 277
 DURANT FL 33530

Mailing Address

7725 TURKEY CREEK RD
 P.O. 277
 DURANT FL 33530

716928



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2986266

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

COOK, NOLAN
3011 LEWIS RD
DOVER FL 33527

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

John Sloan PD

John Sloan PD

2/12/01

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

TITLE: **VD** Delete
 NAME: **HURLEY, GORDON**
 STREET ADDRESS: **1508 BLOOMINGDALE AVE**
 CITY-ST-ZIP: **VALRICO FL**

TITLE: **John Sloan PD** Change Addition
 NAME: **John Sloan PD**
 STREET ADDRESS: **1405 STEPHENS OAK ROAD**
 CITY-ST-ZIP: **Plant City, Florida 33567**

TITLE: **STD** Delete
 NAME: **MINDEDAHL, GENE**
 STREET ADDRESS: **1503 RANCHERO LANE**
 CITY-ST-ZIP: **PLANT CITY FL**

TITLE: **Don Kirby VD** Change Addition
 NAME: **Don Kirby VD**
 STREET ADDRESS: **7831 S. TURKEY CREEK ROAD**
 CITY-ST-ZIP: **DURANT, Florida 33530**

TITLE: **PD** Delete
 NAME: **COOK, NOLAN**
 STREET ADDRESS: **3011 LEWIS ROAD**
 CITY-ST-ZIP: **DOVER FL**

TITLE: **DALE HARVILL SD** Change Addition
 NAME: **DALE HARVILL SD**
 STREET ADDRESS: **5310 BERRY PATCH ROAD**
 CITY-ST-ZIP: **Dover, Florida 33527**

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

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

TITLE: Change Addition
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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:

John Sloan **SIGNATURE REQUIRED** *John Sloan* *2/12/01*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)