

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 731608

1. Entity Name

MARION BAPTIST ASSOCIATION, INC.

Principal Place of Business

1131 NE 8TH AVENUE
OCALA FL 34470

Mailing Address

P O BOX 1137
OCALA FL 34478

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

59-1781101

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NEWMAN, DON
14550 SE 65 CT
SUMMERFIELD FL 34491

7. Name and Address of New Registered Agent

Name

WALKER, RON

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

6107 SE AGNEW RD

City

BELLEVIEW

FL

Zip Code

34420-0410

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

Ronald Walker

Ron Walker/Moderator 1/9/01

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

TITLE VD
NAME NEWMAN, DONALD REV
STREET ADDRESS PO BOX 58
CITY-ST-ZIP SUMMERFIELD FL ☒ Delete

TITLE SD
NAME WILLIS, LEJUANNA
STREET ADDRESS 3508 NE 22 CT
CITY-ST-ZIP Ocala FL 34479 ☐ Delete

TITLE VD
NAME WALKER, RON
STREET ADDRESS 6107 SE AGNEW RD
CITY-ST-ZIP BELLEVIEW FL 34420 ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VD
NAME WALKER, RON REV
STREET ADDRESS 6107 SE AGNEW RD
CITY-ST-ZIP BELLEVIEW, FL 34420-0410 ☒ Change ☐ Addition

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

TITLE VD
NAME SNELL, JAMES REV
STREET ADDRESS 14100 E HWY 40
CITY-ST-ZIP SILVER SPRINGS, FL 34488 ☒ Change ☐ Addition

TITLE TD
NAME RUSSELL, HAROLD
STREET ADDRESS 901 NE 56 ST
CITY-ST-ZIP Ocala, FL 34479 ☐ Change ☒ Addition

TITLE ☐ Change ☐ Addition
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: X

Ronald Walker

Ron Walker/Moderator 1/9/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jan 23, 2001 8:00 am
Secretary of State

01-23-2001 90065 031 ****61.25



DO NOT WRITE IN THIS SPACE

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CR2E037 (10/00)