

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 06, 2001 8:00 am**  
**Secretary of State**

02-06-2001 90034 010 \*\*\*\*70.00

**DOCUMENT # 732789**

1. Entity Name

**FIRST BAPTIST CHURCH, INC.**

Principal Place of Business

Mailing Address

**3301 DAIRY RD.  
 MELBOURNE FL 32904**

**3301 DAIRY RD.  
 MELBOURNE FL 32904**

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

**59-0782447**

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

**JONES, CECIL S  
 1808 PINE STREET  
 MELBOURNE BEACH FL 32951**

Name **Jack P. Robinson**

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

**3393 Mazur Drive**

City **Melbourne**

**FL**

Zip Code **32901**

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

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 **DVP** Secretary  Delete  
 NAME **WHERRY, STEVE**  
 STREET ADDRESS **3916 PEACOCK DR**  
 CITY-ST-ZIP **W MELBOURNE FL 32904**

TITLE Treasurer  Change  Addition  
 NAME **John Goodson**  
 STREET ADDRESS **390 Franklyn Ave**  
 CITY-ST-ZIP **Indialantic, FL 32903**

TITLE **SP** Vice President  Delete  
 NAME **GILLIS, A. KNOX**  
 STREET ADDRESS **5275 LAGUNA VISTA DR**  
 CITY-ST-ZIP **MELBOURNE FL**

TITLE Director  Change  Addition  
 NAME **Robert W. Tinsley**  
 STREET ADDRESS **3465 Shady Run Road**  
 CITY-ST-ZIP **Melbourne, FL 32934**

TITLE **PO** President  Delete  
 NAME **ROBINSON, JACK P**  
 STREET ADDRESS **3393 MAZUR DIRVE**  
 CITY-ST-ZIP **MELBOURNE FL**

TITLE Director  Change  Addition  
 NAME **John Edwards**  
 STREET ADDRESS **301 Hailwood**  
 CITY-ST-ZIP **Melbourne, FL 32901**

TITLE **D**  Delete  
 NAME **MURPHY, GENE**  
 STREET ADDRESS **2260 SOUTH FRONT STREET**  
 CITY-ST-ZIP **MELBOURNE FL**

TITLE Director  Change  Addition  
 NAME **Dudley Garner**  
 STREET ADDRESS **1361 Meadowbrooke Road NE**  
 CITY-ST-ZIP **Palm Bay, FL 32905**

TITLE **PD**  Delete  
 NAME **JONES, CECIL S.**  
 STREET ADDRESS **1808 PINE STREET**  
 CITY-ST-ZIP **MELBOURNE BEACH FL 32951**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **D**  Delete  
 NAME **GOODSON, RAYMOND**  
 STREET ADDRESS **403 AMHURST AVENUE**  
 CITY-ST-ZIP **MELBOURNE FL**

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:

SIGNATURE *Jack P. Robinson*

**1/24/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E037 (10/00)