

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

FILED
May 07, 2003 8:00 am
Secretary of State

05-07-2003 90169 008 ****61.25

DOCUMENT # 733866

1. Entity Name

**PROVIDENCE PROGRESSIVE BAPTIST CHURCH OF BARTOW,
FLORIDA INC..**



Principal Place of Business

**PROVIDENCE PROGRESSIVE M B C
510 BOTTLE AVENUE
BARTOW FL 33830
US**

Mailing Address

**PROVIDENCE PROGRESSIVE M B C
510 BOTTLE AVENUE
BARTOW FL 33830
US**

2. Principal Place of Business

510 N BATTLE AVE

3. Mailing Address

510 N BATTLE AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
BARTOW, FL

City & State
BARTOW, FL

Zip
33830

Country
US

Zip
33830

Country
US

4. FEI Number **05-0043644**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ROBINSON, EDDIE G
2195 E GIBBONS ST
BARTOW FL 33830**

7. Name and Address of New Registered Agent

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. 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

TITLE **TD** ☐ Delete
NAME **BURGESS, CARL J.**
STREET ADDRESS **830 POLK ST.**
CITY-ST-ZIP **BARTOW FL**

TITLE **VPD** ☐ Delete
NAME **BURGESS, LOUIS A**
STREET ADDRESS **1226 LONGWOOD OAKS BLVD**
CITY-ST-ZIP **LAKE LAND FL**

TITLE **SD** ☐ Delete
NAME **BURGESS, HERMAN L.**
STREET ADDRESS **595 WALDON AVE**
CITY-ST-ZIP **BARTOW FL**

TITLE **PD** ☐ Delete
NAME **SIMS, OLIVE**
STREET ADDRESS **1950 LAUREL STL**
CITY-ST-ZIP **BARTOW, FLORIDA 0**

TITLE **T** ☐ Delete
NAME **LOWE, JOHNNIE SR**
STREET ADDRESS **1405 W BRYANT**
CITY-ST-ZIP **BARTOW FL 33830**

TITLE **T** ☐ Delete
NAME **ROBINSON, EDDIE G**
STREET ADDRESS **2195 E GIBBONS**
CITY-ST-ZIP **BARTOW FL 33830**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
NAME
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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:

Signature of EDDIE G. ROBINSON

5-5-03 863-534-2370

CR2E037 (10/02)