

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

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90330 039 ****61.25

DOCUMENT # 736881

1. Entity Name

CHARLIE CREEK FAITH BAPTIST CHURCH, INC.



Principal Place of Business

**6885 STATE RD E
ZOLFO SPRINGS FL 33890**

Mailing Address

**% DOROTHY L. GARDNER
1167 SPARROW RD
ZOLFO SPRINGS FL 33890-5018
US**

2. Principal Place of Business

6885 State Rd 64E

Suite, Apt. #, etc.

3. Mailing Address

6885 St. Rd 64E

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

Wauchula, FL

City & State

Wauchula, FL

4. FEI Number **65-0983262**

Applied For

Not Applicable

Zip

33873

Country

USA

Zip

33873

Country

USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GARDNER, DOROTHY
1167 SPARROW ROAD
ZOLFO SPRINGS FL 33890**

7. Name and Address of New Registered Agent

Name **J. Russell Soles**
Street Address (P.O. Box Number is Not Acceptable) **619 Maude Rd.**
City **Wauchula** FL Zip Code **33873**

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

J. Russell Soles

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

2/14/03

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 **DS** ☒ Delete
NAME **GARDNER, DOROTHY L.**
STREET ADDRESS **1167 SPARROW RD**
CITY-ST-ZIP **ZOLFO SPRINGS FL**

TITLE **D** ☒ Delete
NAME **BEARSALL, EDWARD**
STREET ADDRESS **29 DELANY HEIGHTS**
CITY-ST-ZIP **AVON PARK FL 33825**

TITLE **D** ☐ Delete
NAME **CHANDLER, MARCIA**
STREET ADDRESS **1012 SPARROW ROAD**
CITY-ST-ZIP **ZOLFO SPRINGS FL 33890**

TITLE **D** ☐ Delete
NAME **OAKMAN, MARCILL**
STREET ADDRESS **1234 SPARROW RD**
CITY-ST-ZIP **ZOLFO SPRINGS FL 33890**

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 **J. Russell Soles DS** ☐ Change ☒ Addition
NAME
STREET ADDRESS **619 Maude Rd**
CITY-ST-ZIP **Wauchula, FL 33873**

TITLE **D** ☐ Change ☒ Addition
NAME **Jack White**
STREET ADDRESS **1910 Orange Blossom Ave**
CITY-ST-ZIP **Sebring, FL 33870**

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

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

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:

J. Russell Soles **2/12/2003**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)