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2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attact

SIGNATURE

Aug 21, 2001 8:00 am § Secretary of State DOCUMENT # 738343 1. Entity Name 08-21-2001 90003 041 ****61.25 BIBLE BAPTIST CHURCH OF ST. AUGUSTINE, INCORPORA Principal Place of Business (Mailing Address 2485 OLD MOULTRIE RD 977810 2485 OLD MOULTRIE RD ST. AUGUSTINE FL 32086 ST. AUGUSTINE FL 32086 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2128845 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required... 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) DAVIS, ALLEN H 238 DANTMOUTH RD. ST AUGUSTINE FL 32086 Zip Code 3208し 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 \$5.00 May Be Make Check Payable to Trust Fund Contribution. After September 12, 2001, min. will be \$236.25 Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE (5/01) Change ☐ Addition NAME **BLAIR, JEAN** NAME STREET ADDRESS 2670 OLD MOULTRIE RD STREET ADDRESS CR2E037 CITY-ST-7/P ST AUGUSTINE FL 32086 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME **BLAIR. SANFORD** NAME STREET ADDRESS 2670 OLD MOULTRIE RD STREET ADDRESS CITY-ST-ZIP ST AUGUSTINE FL 32086 CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition SPURLOCK, JESSIE SPULLOCK, JESSIE NAME NAME 2575 SAN JUAN DR STREET ADDRESS 2575 SAN JUAN DR STREET ADDRESS CITY-ST-ZIP ST. AUGUSTINE, FL 32086 ST AUGUSTINE FL 32086 CITY-ST-ZIP PD TITLE PD ☐ Delete TITLE ✓ Change Addition DAVIS ALLEN H NAME DAVIS, ALLEN H NAME 159 PHOENETIA DR. STREET ADDRESS 238 DANTMOUTH RD. STREET ADDRESS ST. AUGUSTINE, FL 32086 CITY-ST-ZIF SAINT AUGUSTINE FL 32086 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

with all other like empowered.