

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 17, 2000 8:00 am**  
**Secretary of State**

05-17-2000 90945 020 \*\*\*\*61.25

**DOCUMENT # 739124**

1. Entity Name

**FIRST BAPTIST CHURCH OF GILLETTE, INC.**

Principal Place of Business

Mailing Address

**3301 97TH STREET EAST  
 PALMETTO FL 34221**

**3301 97TH STREET EAST  
 PALMETTO FL 34221-8698**

100770



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-2181586**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**SNELL, MR. RANDOLPH  
 10608 US HWY 41 N  
 PALMETTO FL 34221**

Name

**TEACHEY, MRS. LYNN**

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

**905 24th AVE W**

City

**PALMETTO**

**FL**

Zip Code

**34221**

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 *x Mrs Lynn Teachey, DIRECTOR*

**4-27-00**

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	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	D	FLETCHER, JOHN	3010 85TH ST. E. PALMETTO FL	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	D	TEACHEY, MRS. LYNN	905 24TH AVE W PALMETTO FL	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	D	TEACHEY, MR. BOB	905 24TH AVE W PALMETTO FL	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	SD	CADWELL, JOHN BUZBEE	4003 57TH ST. E. PALMETTO FL	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	PD	SNELL, RANDOLPH	10608 U.S. 41 NORTH PALMETTO FL	<input checked="" type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Mrs Lynn Teachey* **4-27-00** **941-723-2855**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR20000710/000