

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

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90506 024 ****61.25

DOCUMENT # 739360

1. Entity Name
**THE CONSERVATIVE BAPTIST ASSOCIATION OF
FLORIDA, INC.**



Principal Place of Business
1990 NEPTUNE RD
KISSIMMEE, FL 34744-4940 US

Mailing Address
1990 NEPTUNE RD
KISSIMMEE, FL 34744-4940 US

2. Principal Place of Business
2304 Kings Crest Rd

3. Mailing Address
2304 Kings Crest Rd

Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
Kissimmee, FL

City & State
Kissimmee, FL

4. FEI Number
59-1856300

Applied For
Not Applicable

Zip
34744-6247

Country
Osceola

Zip
34744-6247

Country
Osceola

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

6. Name and Address of Current Registered Agent
**WOODBURN, CHAD
1990 NEPTUNE RD
KISSIMMEE, FL 34744-4940**

7. Name and Address of New Registered Agent
Name
Francis Leonard
Street Address (P.O. Box Number is Not Acceptable)
2304 Kings Crest Rd.
Kissimmee, FL
City
Kissimmee **FL** Zip Code
34744-6247

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 **X Francis Leonard** **x 4-17-03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	☒ Delete	TITLE	D	☒ Change ☐ Addition
NAME	WOODBURN, CHAD		NAME	Francis Leonard	
STREET ADDRESS	1990 NEPTUNE RD		STREET ADDRESS	2304 Kings Crest Rd	
CITY-ST-ZIP	KISSIMMEE, FL 347444940		CITY-ST-ZIP	Kissimmee, FL 34744-6247	
TITLE	D	☐ Delete	TITLE	D	☒ Change ☐ Addition
NAME	ANDERSON, LEONARD		NAME	John H Estep	
STREET ADDRESS	6092 BRIARCLIFF RD		STREET ADDRESS	1501 W. Mineral Ave., Suite B	
CITY-ST-ZIP	FORT MYERS, FL 339124201		CITY-ST-ZIP	Littleton, CO 80120-5612	
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	SEABROOK, DAVID		NAME		
STREET ADDRESS	1551 W CAMINO REAL		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL 334868454		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	JOHNSON, GEORGE		NAME		
STREET ADDRESS	1071 MOHAWK RD		STREET ADDRESS		
CITY-ST-ZIP	VENICE, FL 33535353		CITY-ST-ZIP		
TITLE	D	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	GORTON, DENNIS		NAME		
STREET ADDRESS	1501 W MINERAL AVENUE		STREET ADDRESS		
CITY-ST-ZIP	LITTLETON, CO 801206612		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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **John H Estep** **3/14/03** **720-283-3030**
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # **X1290**

CR2E037 (10/02)