

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 742242

1. Entity Name

FIRST BAPTIST CHURCH OF LEESBURG, INC.

Principal Place of Business

Mailing Address

220 N. 13 ST. (34748)
P O BOX 490957
LEESBURG FL 34749

220 N. 13 ST. (34748)
P O BOX 490957
LEESBURG FL 34749

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0637837

Applied For

Not Applicable

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

BLANCHARD, JUDY
220 NORTH 13TH ST.
LEESBURG FL 34748

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.

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	HUX, MARSHALL 1009 N. SHORE DR. LEESBURG FL 34748 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WALKER, JAMES M. 1009 COTTONWOOD LEESBURG FL 34748 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BAKER, PEGGY A 2341 CONESTOGA DR LEESBURG FL 34748 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TEAGUE, GARY 2306 QUEEN PALM CT. LEESBURG FL 34748 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SMITH, GAYLE 1328 LEE COURT LEESBURG FL 34748 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BLANCHARD, JUDY 220 N. 13TH ST LEESBURG FL 34748 ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	NORMAN CUMMINS (I) 16400 LAKE SHORE DR. (PRESIDENT) Clermont, FL 34711-9464 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT (I) Teague, GARY 2306 Queen Palm Ct. Leesburg, FL 34748 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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:

Judy Blanchard REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/1/02

Date

352-787-1005

Daytime Phone #

FILED
Jul 14, 2002 8:00 am
Secretary of State

05-24-2002 91274 007 ****61.25

97140



DO NOT WRITE IN THIS SPACE

CR2037 (9/01)