## 2000 UNIFORM BUSINESS REPORT (UBR)

## Apr 19, 2000 8:00 am Secretary of State **DOCUMENT # 742522** 1. Entity Name 04-19-2000 90046 030 \*\*\*\*61.25 TRUSTEES OF BRANCHTON BAPTIST CHURCH, INC. Mailing Address Principal Place of Business 15310 MORRIS BRIDGE ROAD 15310 MORRIS BRIDGE ROAD THONOTOSASSA FL 33592-2234 THONOTOSASSA FL 33592 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State Applied For City & State 4. FEI Number NOT APPLICABLE Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) KRUTSINGER. STEVEN M 15299 MORRIS BRIDGE ROAD THONOTOSASSA FL 33592 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating Make Check Pavable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change ☐ Addition STD TITLE ☐ Delete TITLE DYKES, RITA C. NAME NAME STREET ADDRESS STREET ADDRESS 15325 MORRIS BRIDGE ROAD CITY-ST-ZIP CITY-ST-7IP THONOTOSASSA FL ☐ Change ☐ Addition TITI F ☐ Delete TITLE HALE, BRENDA NAME NAME STREET ADDRESS STREET ADDRESS 10818 CEDAR COVE DR CITY-ST-ZIP CITY-ST-ZIP THONOTOSASSA FL 33592 ☐ Defete TITLE ☐ Change ☐ Addition TITLE NAME FULFORD, CLARENCE NAME STREET ADDRESS STREET ADDRESS 15421 MORRIS BRIDGE RD CITY-ST-ZIP CITY-ST-ZIP THONOTOSASSA FL Delete TITLE Change ☐ Addition TITLE ARNOLD, ROBERTSON F. NAME NAME STREET ADDRESS STREET ADDRESS 15425 MORRIS BRIDGE RD CITY-ST-ZIP CITY-ST-ZIP THONOTOSASSA FL Change Addition ☐ Delete TITLE TITLE NAME BRITE, VERNON NAME STREET ADDRESS STREET ADDRESS 33305 CAMERTON RD CITY-ST-ZIP CITY-ST-ZIP ZEPHYRHILLS FL 33543 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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

SIGNATURE AND TYPED OF BRINTED NAME OF SIGNING OFFICED OR DIREC

changed, or on an attachment with an address, with all other like empowered.

4/11/00

FILED

813-664-6106