## **2001 UNIFORM BUSINESS REPORT (UBR)**

## May 18, 2001 8:00 ams Secretary of State **DOCUMENT # 742522** 1. Entity Name 05-18-2001 91599 035 \*\*\*\*61.25 TRUSTEES OF BRANCHTON BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 15310 MORRIS BRIDGE ROAD 15310 MORRIS BRIDGE ROAD 552500 THONOTOSASSA FL 33592 THONOTOSASSA FL 33592 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number NOT APPLICABLE Not Applicable Zip Country \$8:75 Additional Zip Country 5. Certificate of Status Desired -Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New 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 FL 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) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ■ Addition Delete ☐ Change STD TITLE TITLE NAME DYKES, RITA C. NAME 15325 MORRIS BRIDGE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP THONOTOSASSA FL ☐ Addition TITI F Change ☐ Delete TITLE NAME HALE, BRENDA 10818 CEDAR COVE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THONOTOSASSA FL 33592 ☐ Change ■ Addition Delete TITLE NAME FULFORD. CLARENCE NAME STREET ADDRESS STREET ADDRESS 15421 MORRIS BRIDGE RD CITY-ST-ZIP CITY-ST-ZIP THONOTOSASSA FL ☐ Change ☐ Addition ☐ Delete TITLE ARNOLD, ROBERTSON F. NAME NAME STREET ADDRESS 15425 MORRIS BRIDGE RD STREET ADDRESS CITY-ST-ZIP THONOTOSASSA FL CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE BRITE, VERNON NAME NAME STREET ADDRESS 33305 CAMERTON RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ZEPHYRHILLS FL 33543 ☐ Change Addition TITLE TITLE 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.

Bertson F. Arnold 5-15-01