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

## **DOCUMENT # 743764**

1. Entity Name

## FIRST BAPTIST CHURCH OF DEERFIELD BEACH, INC.



Apr 28, 2003 8:00 am Secretary of State 04-28-2003 90311 015 \*\*\*\*61.25

**FILED** 

			GO WE IT	<b>'</b>					
701 N.E. 2ND STREET 70		Mailing Address 701 N.E. 2ND STREET DEERFIELD BEACH FL 334	•						
2. Principal (	Place of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES				
					<u> </u>				
City & State		City & State	City & State		4. FEI Number <b>59-0806969</b>		Applied For Not Applicable		
Zip Country Z		Zip	Country	Country 5. Certificate of Status Desired		\$8.75 Additional Fee Required			
	6. Name and Address of Current	Registered Agent	<u> </u>	7. Name and Address of New Registered Agent			┨		
		A Section Street	- Name	the second of the second		2°*		1	
DEVITT, 1 612 SE 7			Street Addres	ess (P.O. Box Number is Not Acceptable)			1		
	LD BEACH FL 33441				<del></del>	<del> </del>		1	
	*		City		پ <b>F</b> L			Zip Code	
8. The above	e named entity submits this statement for tions of registered agent.	or the purpose of changing its	registered office or regis	stered agent, or both, in t	he State of Florida. I a	ım familiar with,	and accept	1	
SIGNATURE	Signature, typed or printed, name of registered agent		E: Registered Agent signature req		DAT			1	
4	FILE NOW: FEÉ IS \$61.25	9. Election Car Trust Fund C	eign Financing \$5.00 May Be atribution. Added to Fees Make Check Payable to Florida Department of State						
10.	OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			1	
TITLE	T	☐ Delete	TITLE			☐ Change	☐ Addition	] [	
NAME :	DUGMORE, KEN 904 SE 15TH CT		NAME					13	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441		STREET ADDRESS CITY-ST-ZIP					5	
TITLE	T	☐ Delete	TITLE			☐ Change	Addition		
NAME	CRAIG, ROY C		NAME					1	
STREET ADDRESS CITY-ST-ZIP	6000 NW 43RD TERR		STREET ADDRESS					Ì	
TITLE	COCONUT CREEK FL 33073	□ Delete	CITY-ST-ZIP	<del> </del>	The second of th			}	
NAME	CAGLE, CLEATUS	□ Delete	TITLE		<b>4</b>	Change Change	☐ Addition		
STREET ADDRESS	448 NE 8TH TERR		STREET ADDRESS						
CITY-ST-ZIP	DEERFIELD BCH FL 33486		CITY-ST-ZIP						
TITLE	T	☐ Delete	TITLE			☐ Change	Addition	1	
NAME STREET ADDRESS	DEVITT, MARK		NAME					-	
CITY-ST-ZIP	612 SE 7TH AVE DEERFIELD BEACH FL 33441		STREET ADDRESS CITY-ST-ZIP						
TITLE	T	□ Delete	TITLE		Δ	Change	Addition	1	
NAME	WILSON, LARRY	→ Délé∕é	NAME .		*	□ cuange			
STREET ADDRESS	9611 NW 4 ST.		STREET ADDRESS						
CITY-ST-ZIP	PEMBROKE PINES FL 33024		CITY-ST-ZIP	, 111 <del>2</del> <del>2</del>					
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition		
name Street address			NAME STREET ADDRESS						
CITY-ST-ZIP			STREET ADDRESS 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:** 

4-23-03

952/-427-1216