FILED

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

## Apr 11, 2003 8:00 am § Secretary of State DOCUMENT # 743988 04-11-2003 90089 005 \*\*\*\*61.25 FIRST BAPTIST CHURCH AT HILLSBORO, INC. Principal Place of Business Mailing Address 2800 W PROSPECT RD. 2800 W PROSPECT RD. FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309 2. Principal Place of Business 5/00 W. Hills boro Blvd 3. Mailing Address HYLS boro Bld 5/00 W. Suité, Apt. #, etc CHECK HERE IF MAKING CHANGES OCO NUL CVEUK 4. FEI Number 59-1163452 City & State Applied For Oconut Creek Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Brower browand 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WILLIAMSON, JERRY Street Address (P.O. Box Number is Not Acceptable 2800 W. PROSPECT ROAD FT LAUDERDALE FL 33309 8. The above named entity submits this statement for the purpose Analysing 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 9. Election Campaign Financing Make Check Pavable to \$5.00 May Be E NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS TD TITLE ☐ Delete TITLE ☐ Addition NAME PETREE, ROY NAME 11260 NW 5TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **CORAL SPRINGS FL 33071** CITY-ST-ZIP ☐ Change , 🔲 Addition TITLE Delete TITLE WILLIAMSON, JERRY NAME NAME 5100 West Ethisboro Boundary STREET ADDRESS STREET ADDRESS Coverate ada Alcali Coma CITY-ST-ZIP---CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE CYRUS, PARTIEK POTOCK NAME NAME 2731 N.W. 105TH TERR. STREET ADDRESS STREET ADDRESS **CORAL SPRINGS FL** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS *7*3663 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition 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 peport 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 life empowered.

SIGNATURE: