## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 11, 2002 8:00 am Secretary of State **DOCUMENT # 746031** 1. Entity Name CIRCLE BAPTIST CHURCH, INC. 02-11-2002 90097 012 \*\*\*\*61.25 Principal Place of Business Mailing Address 808 NEW WARRINGTON ROAD **908 NEW WARRINGTON ROAD** PENSACOLA FL 32506 PENSACOLA FL 32506 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1804814 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 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) WOOD, HELEN 910 N 58TH AVE PENSACOLA FL 32506 City 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. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE STEPHENS, LARRY L. NAME NAME STREET ADDRESS STREET ADDRESS 5510 CANTERBURY CR. CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL DS ☐ Change ☐ Addition TITLE TITLE ☐ Delete JORDAN, E W NAME NAME STREET ADDRESS STREET ADDRESS 2459 GRANADA CAMINO CITY-ST-7IP PENSACOLA FL 32507 CITY-ST-ZIF ☐ Change Addition Delete TITLE TITLE Cooper, Winifred 405 TAMPICO WAY LISTER, BROADUS J NAME NAME STREET ADDRESS STREET ADDRESS 207 THAYER AVE. CITY-ST-ZIP ENSACOLA, FL 32506 CITY-ST-ZIP PENSACOLA FL ۷D ☐ Change Addition Delete TITLE TITLE WOOD, RICHARD L NAME Duclos, KEITH NAME 5747 VENTURA LANE STREET ADDRESS 1715 ORA DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA, FL 00000 ☐ Delete TITLE ☐ Change ☐ Addition TITLE WOOD, HELEN NAME NAME 910 N 58TH AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL ☐ Change ☐ Addition ☐ Delete 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.

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Helen Wood 455-5635
Date Daytime Pho