

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

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90371 015 ****61.25

DOCUMENT # 752975

1. Entity Name
**BETHEL BAPTIST CHURCH, INDEPENDENT, OF RIVERVIEW
, FLORIDA, INC.**



Principal Place of Business
**12846 BALM RIVERVIEW RD
RIVERVIEW FL 33569**

Mailing Address
**12846 BALM RIVERVIEW RD
RIVERVIEW FL 33569**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2019704**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCAZLIONE, JOHN
12846 BALM RIVERVIEW RD
RIVERVIEW FL 33569**

Name **Jody Hebrank**
Street Address (P.O. Box Number is Not Acceptable)
12846 Balm Riverview Rd
City **Riverview FL** Zip Code **33569**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Jody Hebrank*

(NOTE: Registered Agent signature required when reinstating)

DATE **11/21/2003**

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PD	SHULAR, FREDDIE JOE	114 PHILLIPS DRIVE	SEFFNER FL	<input type="checkbox"/>	<input type="checkbox"/>
D	BUTCHER, JAMES	12210 ELNORA DR	RIVERVIEW FL	<input type="checkbox"/>	<input type="checkbox"/>
VD	BAKER, LAVAUGHN	P.O. BOX 95 N/A	GIBSONTON FL	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Freddie Shular* P/O. **1-21-03 (813) 685 2759**

CR2E037 (10/02)